

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 27, 1999 8:00 am
Secretary of State

07-27-1999 90025 036 ***150.00

DOCUMENT # **V52442**

1. Corporation Name

ZOO TOO INC.

Principal Place of Business

**19610 NE 18 PL
N. MIAMI BEACH FL 33179**

Mailing Address

**19610 NE 18 PL
N. MIAMI BEACH FL 33179**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/22/1992

2. Principal Place of Business

21 20139 NE 15 CT

Suite, Apt. #, etc.

22

City & State

23 N. MIAMI BEACH FL

Zip

24 33179

Country

2a. Mailing Address

26 20139 NE 15 CT

Suite, Apt. #, etc.

City & State

28 N. MIAMI BEACH, FL

Zip

29 33179

Country

30

4. FEI Number

65-0349364

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

**FRAID, ARIE
19610 NE 18 PL
N. MIAMI BEACH FL 33179**

10. Name and Address of New Registered Agent

81 Name

FRAID ARIE

82 Street Address (P.O. Box Number is Not Acceptable)

20139 NE 15 CT

83 City

N. MIAMI BEACH

FL

85 Zip Code

33179

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE
NAME **FRAID, ARIE**
STREET ADDRESS **19610 NE 18 PL**
CITY-ST-ZIP **N. MIAMI BEACH FL**

TITLE **VPS** ☐ DELETE
NAME **FRAID, ELENOR**
STREET ADDRESS **19610 NE 18 PL**
CITY-ST-ZIP **N. MIAMI BEACH FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P** ☒ Change ☐ Addition
1.2 NAME **FRAID, ARIE**
1.3 STREET ADDRESS **20139 NE 15 CT**
1.4 CITY-ST-ZIP **N. MIAMI BEACH, FL 33179**

2.1 TITLE **VPS** ☒ Change ☐ Addition
2.2 NAME **FRAID, ELENOR**
2.3 STREET ADDRESS **20139 NE 15 CT**
2.4 CITY-ST-ZIP **N. MIAMI BEACH, FL 33179**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/99)

596599-90025-36

U52442

ZOO TOO INC.
20139 NE 15 CT.
NORTH MIAMI BEACH, FLORIDA 33179

July 12, 1999

Division of Corporations
Annual Reports Filings
PO Box 1500
Tallahassee, Florida 32303-1500

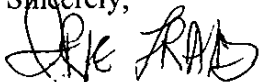
Dear Sir or Madam:

Enclosed please find my check for \$150.00 to renew my corporation. I never received the first notice and request that you please waive the penalty.

My corporation has been in good standing since 1992. My office moved and the mail was never forwarded to me.

Please accept this check and renew my corporation for the year 1999. Thank you.

Sincerely,



Arie Fraid, President