## 2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P24000050720 Entity Name: G&M ZEN INC.

**Current Principal Place of Business:** 

7901 4TH ST N STE 300

ST. PETERSBURG, FL 33702

**Current Mailing Address:** 

7901 4TH ST N STE 300

ST. PETERSBURG, FL 33702 US

FEI Number: 99-4265738 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC 7901 4TH ST N STE 300 ST. PETERSBURG, FL 33702 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**FILED** Apr 24, 2025

**Secretary of State** 

9562679726CC

Officer/Director Detail:

Title **PRESIDENT** Title **SECRETARY** Name WEBER, GAVIN Name WEBER, MAGAN

7901 4TH ST N STE 300 Address 7901 4TH ST N STE 300 Address

City-State-Zip: ST. PETERSBURG FL 33702 ST. PETERSBURG FL 33702 City-State-Zip:

Title **TREASURER** Title DIRECTOR Name WEBER, GAVIN Name WEBER, MAGAN

Address 15133 SHADY PALMS Address 7901 4TH ST N STE 300 ST. PETERSBURG FL 33702 City-State-Zip: NOKOMIS FL 34275 City-State-Zip:

Title DIRECTOR

Name WEBER, MAGAN

Address 7901 4TH ST N STE 300

City-State-Zip: ST. PETERSBURG FL 33702

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: GAVIN WEBER

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

04/24/2025 Date