FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000060384

1. Corporation Name

RAZCOM INC.

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90144 045 ***150.00

Principal Place	of Business	Mailing Address			L 18611881 (18 1818) (Blit BBitt
3401 N. COUNTRY CLUB DRIVE SUITE 105 AVENTURA FL 33180		3401 N. COUNTRY CLUB DRIVE SUITE 105 AVENTURA FL 33180			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed 07/08/1998
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			65085008 Not Applicable
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired S8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Coi	intry	8. This corporation owes the current year Intangible
24	25 29 3		30		Personal Property Tax.
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent
AME	RILAWYER			81 Name	LACHMI, DAVID
343 ALMERIA AVENUE		•	٠,	82 Street	Address (P.O. Box Number is Not Acceptable)
COR	AL GABLES FL 33134			83	#/10
				34	
			_	84 City	AVENTURA FL 85 Zip Code 33/80
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State or familiar with, and accept the obligation	f Florida. Such change was a	udbonzed	I by the coro	I corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	633	LACYAL,	DAVID		1/30/49
	Signature, typed or printed lage of registered agent	and title if applicable. (NOTE	Registered	Agent signature ri	required when reinstating) DATE ADDITIONS/CHANCES TO DESICERS AND DISCORDS IN 12
12.	P OFFICERS AND	DÉLETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE	•	CJ DELETE	1.2 N		
NAME	LACHMI, DAVID	•		TREET ADDRESS	
STREET ADDRESS	3401 N. COUNTRY CLUB DRIVE			Ī	
CITY-ST-ZIP	AVENTURA FL 33180	☐ DELETE	2.1 TI	TY-ST-ZIP	V P □ Change □ Addition
TITLE	VP YITZHAK COHEN		2.2 N		Called VITZHAK
NAME	3964 NW 94 TERR		1		COHEN, YITZHAK 3964 NW 94 TERR
STREET ADDRESS				TREET ADORESS	
CITY-ST-ZIP	SUNPUSE, FL 333	S / □ DELETE	2.4 C	TTY-ST-ZIP	SUNRISE FL 3335
TITLE		5-c-1-	3.2 N		
NAME			1	TREET ADDRESS	
STREET ADDRESS				ITY-ST-ZIP]
CITY-ST-ZIP		☐ DELETE	4.1 TI		☐ Change ☐ Addition ·
NAME			4.21		
1		٠٠.		TREET ADDRESS	
STREET ADDRESS				TY-ST-ZIP	1
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TI		☐ Change ☐ Addition
NAME		<u></u>	5.2 N		
				TREET ADDRESS	.[
STREET ADDRESS				TY-ST-ZIP	
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TI		☐ Change ☐ Addition
NAME		-	6.2 N	AME I	
STREET ADDRESS			6.3 S	TREET ADDRESS	
CITY-ST-ZIP				TY-ST-ZIP	}

14. I hereby certify that the information supplied with this filling 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, with all other like empowered.

SIGNATURE: _

SIGNA

Daytime Phone #