

P05000101347

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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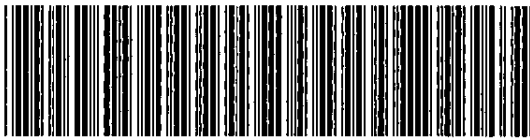
(Business Entity Name)

(Document Number)

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Change

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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4/8/08

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** A2Z WHOLESALE, INC  
(Name of Corporation)

**DOCUMENT NUMBER:** PO5000101347

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

MOHAMMAD HOMSI  
(Name of Contact Person)

A2Z WHOLESALE, INC  
(Firm/Company)

4164 INVERRY DRIVE, BLOC 12 / APT 507  
(Address)

LAUDERHILL, FL 33319  
(City/State and Zip Code)

For further information concerning this matter, please call:

MOHAMMAD HOMSI at ( 954 ) 793-7894  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: AZZ WHOLESALE, INC
2. The principal office address: 4020 NE 5TH AVENUE, BAY 2  
FORT LAUDERDALE, FL 33334
3. The mailing address (if different): 4164 INVERRARY DRIVE, BLOC. 12 / APT 507  
LAUDERHILL, FL 33319
4. Date of incorporation/qualification: 7/19/2005 Document number: P05000101347
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

BISAN, AMIN  
1001 SE 6TH AVE, APT 204  
DEERFIELD BEACH, FL 3344

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

MOHAMMAD HONSI  
4164 INVERRARY DRIVE, BLOC 12, APT 507  
(P.O. Box NOT acceptable)  
LAUDERHILL, FL 33319

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Mohammad Honsi (Signature of an officer or director)      Mohammad Honsi, PRES (Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature] (Signature of Registered Agent)      4-1-2008 (Date)

If signing on behalf of an entity:  
  
\_\_\_\_\_ (Typed or Printed Name)

\*\*\* FILING FEE: \$35.00 \*\*\*