**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

**FILED**
**Jan 10, 2014**
**Secretary of State**
**CC0047585455**

DOCUMENT# P11000082455

**Entity Name:** SHAZZAM, INC.

**Current Principal Place of Business:**

4943 27TH AVENUE SOUTH
GULF PORT, FL 33707

**Current Mailing Address:**

4943 27TH AVENUE SOUTH
GULF PORT, FL 33707

**FEI Number: 32-0364489**

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BLAXBERG, RACHELLE
4943 27TH AVENUE SOUTH
GULF PORT, FL 33707 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

**Officer/Director Detail :**

| | |
|---|---|
| Title | MS. |
| Name | BLAXBERG, RACHELLE |
| Address | 4943 27TH AVE. S. |
| City-State-Zip: | GULF PORT FL 33707 |

*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: RACHELLE S BLAXBERG OFFICER/ PRESIDENT 01/10/2014

Electronic Signature of Signing Officer/Director Detail — Date