

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000075346

**Entity Name:** MAZAL SOLUTIONS CORP

**Current Principal Place of Business:**

1929 SOUTH OAK HAVEN CIRCLE  
NORTH MIAMI BEACH, FL 33179

**Current Mailing Address:**

1929 SOUTH OAK HAVEN CIRCLE  
NORTH MIAMI BEACH, FL 33179

**FEI Number:** 46-0989052

**Certificate of Status Desired:** No

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

STEINVORTZ, ISAAC  
1929 SOUTH OAK HAVEN CIRCLE  
NORTH MIAMI BEACH, FL 33179 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	PT	Title	VPS
Name	STEINVORTZ, ISAAC	Name	ESQUENAZI, LUCY
Address	1929 SOUTH OAK HAVEN CIRCLE	Address	1929 SOUTH OAK HAVEN CIRCLE
City-State-Zip:	NORTH MIAMI BEACH FL 33179	City-State-Zip:	NORTH MIAMI BEACH FL 33179

*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:** ISAAC STEINVORTZ

PT

04/25/2024

Electronic Signature of Signing Officer/Director Detail

Date