

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000002821

FILED
Jan 19, 2008
Secretary of State

Entity Name: THE MAZER CORPORATION

Current Principal Place of Business:

6680 POE AVE
DAYTON, OH 45414

New Principal Place of Business:

Current Mailing Address:

6680 POE AVE
DAYTON, OH 45414

New Mailing Address:

FEI Number: 31-0682290

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FRANKLIN, WILLIAM
Address: 6680 POE AVE
City-St-Zip: DAYTON, OH 45414

Title: S () Delete
Name: ANDREA, FRANKLIN
Address: 6680 POE AVE
City-St-Zip: DAYTON, OH 45414

Title: S () Delete
Name: MAZER, MARCIE
Address: 6680 POE AVE
City-St-Zip: DAYTON, OH 45414

Title: CEO () Delete
Name: MAZER, DAVID
Address: 6680 POE AVENUE
City-St-Zip: DAYTON, OH 45414

Title: D () Delete
Name: MASHIACH, BONNIE
Address: 6680 POE AVENUE
City-St-Zip: DAYTON, OH 45414

Title: COO () Delete
Name: MAZER, CHERIE
Address: 6680 POE AVENUE
City-St-Zip: DAYTON, OH 45414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CHERIE MAZER

COO

01/19/2008

Electronic Signature of Signing Officer or Director

Date