

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F45200

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: H Z H INTERNATIONAL CORPORATION

## Current Principal Place of Business:

7132 S.W. 47 ST.,  
MIAMI, FL 33155

## New Principal Place of Business:

13350 SW 131 STREET  
UNIT 106  
MIAMI, FL 33186

## Current Mailing Address:

7132 S.W. 47 ST.,  
MIAMI, FL 33155

## New Mailing Address:

13350 SW 131 STREET  
UNIT 106  
MIAMI, FL 33186

FEI Number: 59-2181501

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HANDAL, ALEJANDRO A PRESIDE  
11305 S.W. 134TH AVENUE  
MIAMI, FL 33186 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: DP ( ) Delete  
Name: HANDAL, ALEJANDRO A PRESIDE  
Address: 11305 S.W. 134TH AVENUE  
City-St-Zip: MIAMI, FL 33186

Title: DV ( ) Delete  
Name: HANDAL, ALEJANDRO S VP  
Address: 10721 SW 72 COURT  
City-St-Zip: PINECREST, FL 33156

Title: DS ( ) Delete  
Name: CANAS, LISSETTE R SECRETA  
Address: 8221 SW 165 TERRACE  
City-St-Zip: PALMETTO BAY, FL 33157

Title: DT ( ) Delete  
Name: LATORRE, GIANNACARLA TREASUR  
Address: 14243 SW 90 TERRACE  
City-St-Zip: MIAMI, FL 33186

## 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:

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: LISSETTE CANAS

DS

04/21/2009

Electronic Signature of Signing Officer or Director

Date