FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G95774 Corporation Name

YAZ ENTERPRISES, INC.

FILED Feb 08, 1999 8:00am **Secretary of State**

02-08-1999 90026 009 ***150.00

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Principal Place of Business Mailing Address							4			
2605 N.W. 75TH MIAMI FL 33122		2605 N.W. 75TH AVENUE Miami Fl 33122				DO NOT WRITE IN THIS SPACE				
						_		IE IN INIS	SPACE	
						1 -	Date Incorporated or Qualifed 04/11/1984		*	
2. Principal Pl	ace of Business	2a. Mailing Address				4.	FEI Number		A	oplied For
21	•	26					59-2466533		N-	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			_	Certifcate of Status Desired	. 🗆		Additional
22		27	27			Э.	Certificate of Status Desired		Fee R	equired
City & State	9	City & State	Land 17 17 17 17 17 17 17 17 17 17 17 17 17			6.	Election Campaign Financing		\$5.00	May Be
23	,	28	28				Trust Fund Contribution	<u> </u>		to Fees
Zip	Country	Zip	Zip Country			8.	This corporation owes the cur	ent year Int	angible	[
24	25	29 3	o				Personal Property Tax.		X Yes	□No
24	9. Name and Address of Curre					10.	Name and Address of New	Registered	Agent	
		1		B1	Name					
KRONFELD, DAVID				20	Ot	(6	C. Day Number is Not Assest	oblo)		
2605 N.W. 75TH AVENUE			'	82 Street Address (P.O. Box Number is Not Acceptable)						
MIAMI FL 33122				B3)		70.588.188
,,,,,							1.0	set (2 (3 1 2		
				B4	City			FL	85 Zip	Code * ` ' '
.11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered										
Signature of country of both in the State of Floring Such change was adminized by the compositions, i noticely decopy and appointment as 1-3-1-1-1										
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
12. OFFICERS AND DIRECTORS			13.			- 1	ADDITIONS/CHANGES TO OF	FICERS AN	ID DIRECT	ORS IN 12
TITLE	PTD	. DELETE	1,1 TITL	E					Change	☐ Addition
NAME	KRONFELD, DAVID	**	1.2 NAN	Æ			12			· ·
STREET ADDRESS	2605 N.W. 75TH AVENUE	•	1.3 STR	EET A	DDRESS					•
			1,4 CIT	Y-ST-Z	ZIP					
CITY-ST-ZIP	VS	☐ DELETE	2.1 TITL		-	•			Change	☐ Addition
			2.2 NAM	4F					,	
NAME	KRONFELD, MARK				DDRESS					. \
STREET ADDRESS	2605 N.W. 75TH AVENUE								•	
CITY-ST-ZIP	MIAMI FL 33122			2.4 CITY-ST-ZIP 3.1 TITLE					Change	☐ Addition
TITLE GOLD	Augustan (E) Deceie								_
NAME	AND WALL		3.2 NAJ							
STREET ADDRESS	\$7, 198 of \$			3.3 STREET ADDRESS			1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		1	
CITY-ST-ZIP	80.70	C Delete	3.4. CITY-		ZIP			7.0	Change	[] Addition
TITLE		☐ DÉLETE	4.1 TITI				•			
NAME		20	4. 2 NA				•			
STREET ADDRESS		•	1		DDRESS					
CITY-ST-ZIP	·		4.4 CIT		ZIP		···		Channa	Addition
TITLE		☐ DELETE	5.1 TTLE		ļ		9		Change	
NAME	,		5.2 NA				20 miles (1944)	•		
STREET ADDRESS		•			ODRESS					
CITY-ST-ZIP			5.4 CIT		ZIP					
TITLE	TATE OF THE SECOND	☐ DELETE	6.1 TIT						Change	Addition
NAME .	多在1945年美国。新疆市员		6.2 NA	ME						٠.
STREET ADDRESS	1880年2011年		6.3 STI	REETA	ODRESS				٠	
CITY-ST-ZIP	国际人名 想见的		6.4 CIT	Y-ST-2	ZIP		·			
OHITOITEE	1 -								415 41 4 15 4	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 土