

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Monahan
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

DOCUMENT # K44070

(6)

95 APR 19 AM 1:54

1. Corporation Name

AZA VENTURES III, INC.

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business

**2476 N.W. 59TH STREET
BOCA RATON FL 33486**

Mailing Address

**2476 N.W. 59TH STREET
BOCA RATON FL 33486**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/04/1988

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

21 5752 Vintage Oaks Circle

2a. Mailing Address

26 5752 Vintage Oaks Circle

4. FEI Number

05-0062250

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

City & State

23 Delray Beach, Fl.

City & State

28 Delray Beach, Fl.

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

Zip

Country

24 33484

25 USA

Zip

Country

29 33484

30 USA

7. This corporation has liability for intangible tax under S. 189.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

TERREMARK CORPORATE AGENTS, INC.

2001 S. BAYSHORE DRIVE

18TH FLOOR

MIAMI, FL 33133

10. Name and Address of New Registered Agent

81. Name

COBER CORPORATE AGENTS, INC.

82. Street Address (P.O. Box Number is Not Acceptable)

2601 So. Bayshore Dr., 19th Fl.

83.

84. City

Miami

FL

85. Zip Code

33133

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 office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Richard N. Dranshteyn
Signature, typed or printed name of registered agent and the filer (NOTE: If filer is not the registered agent, the filer must also sign and print name.)

JANUARY 25, 1995

12. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	SUTTIN, EUGENE
STREET ADDRESS	2501 NW 59 ST
CITY-ST-ZIP	BOCA RATON FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PSTD	☒ Change ☐ Addition
1.2 NAME	SUTTIN, EUGENE	
1.3 STREET ADDRESS	5752 Vintage Oaks Circle	
1.4 CITY-ST-ZIP	Delray Beach, Fl. 33484	☐ Change ☐ Addition
2.1 TITLE		
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information included 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Richard N. Dranshteyn
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #