

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L38299

Entity Name: MAZO COMPANY INC.

FILED
Apr 30, 2006
Secretary of State

Current Principal Place of Business:

3591 SW 147 AVENUE
MIRAMAR, FL 33027 US

New Principal Place of Business:

15040 S SAXON CIRCLE
SOUTHWEST RANCHES, FL 33331 US

Current Mailing Address:

3591 SW 147 AVENUE
MIRAMAR, FL 33027 US

New Mailing Address:

15040 S SAXON CIRCLE
SOUTHWEST RANCHES, FL 33331 US

FEI Number: 65-0169715

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DELMAZO, ALEXANDER
3591 SW 147 AVENUE
MIRAMAR, FL 33027 US

Name and Address of New Registered Agent:

DELMAZO, ALEXANDER
15040 S SAXON CIRCLE
SOUTHWEST RANCHES, FL 33331 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: ALEXANDER DEL MAZO

04/30/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DEL MAZO, ALEXANDER
Address: 3591 SW 147 AVENUE
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DEL MAZO, ALEXANDER
Address: 15040 S SAXON CIRCLE
City-St-Zip: SOUTHWEST RANCHES, FL 33331

I hereby certify that the information supplied with this filing does not qualify for the 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: ALEXANDER DEL MAZO

P

04/30/2006

Electronic Signature of Signing Officer or Director

Date