

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002310

Entity Name: KAZ'S CORNER INC.

FILED
Jan 04, 2005
Secretary of State

Current Principal Place of Business:

6982 NW 19 ST
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

6982 NW 19 ST
MARGATE, FL 33063

New Mailing Address:

FEI Number: 57-1200266

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZUMBADO, HERMI
9604 N.W. 80TH CT.
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

ZUMBADO, HERMI
6982 N.W. 19 STREET
MARGATE, FL 33063 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: HERMI ZUMBADO

01/04/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Change (X) Addition
Name: ZUMBADO, HERMI
Address: 6982 N.W. 19 STREET
City-St-Zip: MARGATE, FL 33063

Title: V () Change (X) Addition
Name: KYSER, KENNETH W
Address: 8400 N.W. 53 ST.
City-St-Zip: MIAMI, FL 33156

Title: V () Change (X) Addition
Name: FARRAR, CINDY
Address: 3421 OAKMONT DR.
City-St-Zip: PENSACOLA, FL 32503

Title: S () Change (X) Addition
Name: HANLEY, ANNETTE
Address: 18774 N. DESERT LIGHT DR.
City-St-Zip: SURPRISE, AZ 85387

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HERMI ZUMBADO

D

01/04/2005

Electronic Signature of Signing Officer or Director

Date