

FILED
Jun 26, 2002 8:00 am
Secretary of State

06-26-2002 90073 001 ***458.75

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P000Q0023446			
1. Entity Name NAAZA CORPORATION			
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 1897 PB LAKES BLVD. Suite, Apt. #, etc. 226		3. Mailing Address 1897 PB LAKES BLVD. Suite, Apt. #, etc. 226	
City & State WPB FL		City & State WPB FL	
Zip 33409		Zip 33409	
Country USA		Country USA	
4. FEI Number		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent Name WARNER & ASSOCIATES, CPA, PA Street Address (If Not Applicable) 1897 PALM BEACH LAKES BLVD. # 226 City WEST PALM BEACH FL Zip Code 33409			
8. 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 _____ Sign owner, agent or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature is required when transferring) DATE _____			
9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. ☐ (See criteria on back)		January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Department of State	
10. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TOM LOGAR 1897 PDLAKES BLVD. # 226 WPB, FL 33409	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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DO NOT WRITE IN THIS SPACE			
13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 1107, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.			
SIGNATURE: TOM LOGAR - ADMIN/STR.		04.30.02	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Day/Mo/Yr	

CR2E034B (12/01)

Attachment

P99000102824
P99000102831
P00000023446

GLOBALNET MANAGEMENT L.C. 80 CELESTIAL WAY, #110 JUNO BEACH, FL 33408 561-630-5061		63-1444-670	1044
Pay to the order of <u>DEP. of Revenue</u>		<u>05.11.02</u> date	<u>\$458,75</u>
<u>four hundred fifty eight / 75</u>		<u>dollars</u>	Security Features Included. Details on Back.
INDEPENDENT COMMUNITY BANK TEQUESTA, FLORIDA 33460			
<u>for 3x corp.</u>		<u>1019</u>	<u>Cef</u>
+10670144401 0003244 1044			