2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000096993

1. Entity Name
BEZOS TECHNOLOGIES CORPORATION



FILED
Mar 07, 2007 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

2601 SW 142 COURT MAMI, FL 33175 2601 SW 142 COURT MIAM!, FL 33175



01222007 No Chg-P CR2E034 (11/05)

L	ンミはい	JI WAL	"MO"OFA	オケロ(かざん)	4. FEI Number		Applied For
. `.			gger i belgete		65-1066664		Not Applicable
					5. Certificate of Status Desired	Œ	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DIAZ, ADA 8810 SW 132 PLACE #204 MIAMI, FL 33186 DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE.	Signature, typed or printed name of registered agent and title it	applicable. (NGTE. Ro	gistered Agent signature s	opised when minutating)	DAJE				
FILE NOWIL! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Trust Fund Contribu				\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIREC	TORS	V 7 807	电发射系统定义	是是多好了了一个人的人的人,只要不是不会				
TITLE HAME STREET ADDRESS CITY-SY-ZEP	PSD BEZOS, BEATRIZ M 2601 SW 142 COURT MIAMI, FL 33175								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD DIAZ, ADA 8810 SW 132 PLACE #204 MIAMI, FL 33188				000000659005 03/16/07-80013-002 158:75 /				
DILF NAME STREET ADDRESS CITY-ST-71P				DØ	NOT WRITE				
TITLE HAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE				
TITLE RAME STREET ADDRESS City-St-ZP									
HTILE HAME STREET ADDRESS CITY-ST-ZIP									
12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information									

12. I hereby certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or suppliermental 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 emporfered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address/with all other like empowered.

SIGNATURE: 03-01-07 305-298-4989

Description Printed Name of SECHING OFFICER OR DIRECTOR 03-01-07 Description Prome 5