

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000030384

Entity Name: DZN INTERNATIONAL, INC.

FILED
Sep 09, 2005
Secretary of State

Current Principal Place of Business:

4141 NE 2ND AVE, SUITE 203D
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

4141 NE 2ND AVE, SUITE 203D
MIAMI, FL 33137

New Mailing Address:

FEI Number: 65-1085656

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: FAULKNER, ANDRAE
Address: 4141 NE 2ND AVE, SUITE 203D
City-St-Zip: MIAMI, FL 33137

Title: VPD () Delete
Name: AGBENDHEVI, EMMANUEL
Address: 4141 NE 2ND AVE, SUITE 203D
City-St-Zip: MIAMI, FL 33137

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FAULKNER EYO, ANDRAE
Address: 4141 NE 2ND AVE, SUITE 203D
City-St-Zip: MIAMI, FL 33137

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DS () Change (X) Addition
Name: VOIGT, ROSE
Address: 4141 NE 2ND AVE, SUITE 203D
City-St-Zip: MIAMI, FL 33137

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDRAE FAULKNER EYO

D, P

09/09/2005

Electronic Signature of Signing Officer or Director

Date