

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P01000101396

1. Entity Name
LIZAREL, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 MAY 30 AM 5:52

Principal Place of Business
2775 NE 187TH ST. #613
AVENTURA, FL 33180

Mailing Address
2775 NE 187TH ST. #613
AVENTURA, FL 33180

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

05212007

Chg-P

CR2E034 (12/06)

4. FEI Number
65-1140520

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ARELLANO, EVELYN
5727 NW 113TH AVENUE
MIAMI, FL 33178

7. Name and Address of New Registered Agent

Name
ARELLANO, EVELYN

Street Address (P.O. Box Number is Not Acceptable)

2775 NE 187 ST. #613

City
AVENTURA,

FL

33180

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]

EVELYN ARELLANO

05/21/07

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ARELLANO, LUIS AMADO
5727 NW 113TH AVE
MIAMI, FL 33178 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ARELLANO, LISBETH
5727 NW 113TH AVE.
MIAMI, FL 33178 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
200104521162
06/18/07--01073--019 **\$61.25

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P/T/D
ARELLANO, LISBETH
2775 NE 187 ST. #613
AVENTURA, FL 33180 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
PINEDA DE ARELLANO, JULIETA
2775 NE 187 ST. #613
AVENTURA, FL 33180 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LISBETH ARELLANO, PRES 5/21/07

Date

Daytime Phone #