2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000003432

Entity Name: AZAR INVESTMENT, CORP.

FILED Apr 19, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

18851 NE 29TH AVE., #900 18851 NE 29TH AVE AVENTURA, FL 33180

SUITE 900

AVENTURA, FL 33180

Current Mailing Address: New Mailing Address:

18851 NE 29TH AVE., #900 18851 NE 29TH AVENUE 3440 HOLLYWOOD BLVD., STE. 360 SUITE 900

AVENTURA, FL 33180 AVENTURA, FL 33180

FEI Number: 03-0375670 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROTH, LEONARD A ROTH, LEONARDO A 18851 NE 29TH AVE 18851 NE 29TH AVE., #900 SUITE 900 AVENTURA, FL 33180 AVENTURA, FL 33180 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: LEONARDO A ROTH 04/19/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD () Delete Title: () Change () Addition

WAINRIB, ALEJANDRO JOSE Name: Name: 18851 NE 29TH AVE., #900 Address: Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip:

() Delete Title: VTD Title: () Change () Addition

Name: AZAR, VALERIA PAOLA Name: 18851 NE 29TH AVE., #900 Address: Address: AVENTURA, FL 33180 City-St-Zip: City-St-Zip:

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: ALEJANDRO WAINRIB **PSD** 04/19/2005