


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 23, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000106963 1. Entity Name MAZAL REALTY INC.	
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Principal Place of Business 6701 NW 7TH STREET SUITE 156 MIAMI, FL 33126	Mailing Address 6701 NW 7TH STREET SUITE 156 MIAMI, FL 33126
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DO NOT WRITE IN THIS SPACE

03102005 No Chg-P CR2E034 (10/03)

4. FEI Number 04-3717132	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fees Required

6. Name and Address of Current Registered Agent

**AKERMAN, LARRY
6701 NW 7TH STREET
SUITE 156
MIAMI, FL 33126**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P AKERMAN, BERNARDO 6701 NW 7TH ST MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S AKERMAN, ABRAHAM 6701 NW 7TH ST. MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP AKERMAN, LARRY 6701 NW 7TH ST. MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T AKERMAN, SAMMY 6701 NW 7TH ST. MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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03/23/05-80024-019 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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: LARRY AKERMAN 3/17/05 305-261-1156

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #