

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000002893

Entity Name: AZ FINANCIAL SERVICES, INC.

FILED  
Jan 03, 2007  
Secretary of State

## Current Principal Place of Business:

209 OSCEOLA RD  
BELLEAIR, FL 33756

## New Principal Place of Business:

801 W BAY DRIVE  
SUITE 602  
LARGO, FL 33770

## Current Mailing Address:

209 OSCEOLA RD  
BELLEAIR, FL 33756

## New Mailing Address:

801 W BAY DRIVE  
SUITE 602  
LARGO, FL 33770

FEI Number: 65-1167306

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ZOROVICH, ANDREW L  
209 OSCEOLA ROAD  
BELLEAIR, FL 33756 US

## Name and Address of New Registered Agent:

ZOROVICH, ANDREW L  
801 W BAY DRIVE  
SUITE 602  
LARGO, FL 33770 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:

01/03/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: ZOROVICH, ANDREW L  
Address: 209 OSCEOLA ROAD  
City-St-Zip: BELLEAIR, FL 33756

Title: DS ( ) Delete  
Name: ZOROVICH, AMANDA P  
Address: 209 OSCEOLA ROAD  
City-St-Zip: BELLEAIR, FL 33756

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: ZOROVICH, ANDREW L  
Address: 4912 COVE VALLEY DRIVE  
City-St-Zip: OWENS CROSS ROADS, AL 35763

Title: DS (X) Change ( ) Addition  
Name: ZOROVICH, AMANDA P  
Address: 4912 COVE VALLEY DRIVE  
City-St-Zip: OWENS CROSS ROADS, AL 35763

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: ANDREW L ZOROVICH

DP

01/03/2007

Electronic Signature of Signing Officer or Director

Date