

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2005 8:00 am
Secretary of State

01-25-2005 90036 011 ***150.00

DOCUMENT # P03000115371

1. Entity Name
PHAZE, INC.



40005790



Principal Place of Business
451 E. ALTAMONTE DR
SUITE 1109
ALTAMONTE SPRINGS, FL 32701

Mailing Address
451 E. ALTAMONTE DR
SUITE 1109
ALTAMONTE SPRINGS, FL 32701

2. Principal Place of Business
1432 Oviedo Marketplace Blvd.
Suite, Apt. #, etc.
Stc. 123

3. Mailing Address
1432 Oviedo Marketplace Blvd.
Suite, Apt. #, etc.
Stc. 123

01162005 Chg-P CR2E034 (10/03)

City & State
Oviedo, FL

Zip
32765

Country

4. FEI Number
20-0312447

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ABRAHAM, MOHAMMED S
451 E ALTAMONTE DRIVE
SUITE 1109
ALTAMONTE SPRINGS, FL 32701

7. Name and Address of New Registered Agent

Name
Same

Street Address (P.O. Box Number is Not Acceptable)
1432 Oviedo Marketplace Blvd. Stc. 123

City
Oviedo

FL Zip Code
32765

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, typed or printed name of registered agent and title if applicable. (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. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
ABRAHAM, MOHAMMED S
451 E ALTAMONTE DRIVE SUITE 1109
ALTAMONTE SPRINGS, FL 32701 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
ABRAHAM, MOHAMMED H
451 E ALTAMONTE DRIVE SUITE 1109
ALTAMONTE SPRINGS, FL 32701 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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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

1432 Oviedo Marketplace Blvd. Stc. 123
Oviedo, FL 32765

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☒ Change ☐ Addition

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☐ Change ☐ Addition

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: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date
Daytime Phone #

1/18/05