

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000066447

1. Entity Name

BIZ INTERNATIONAL, INC.



Principal Place of Business

205 WORTH AVENUE

SUITE 303

PALM BEACH, FL 33480 US

Mailing Address

205 WORTH AVENUE

SUITE 303

PALM BEACH, FL 33480 US

**FILED**  
**May 02, 2008 08:00 AM**  
**Secretary of State**



04302008

No Chg-P

CR2E034 (11/05)

4. FEI Number

20-1036076

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

BRIAN, PHILIPPE J

205 WORTH AVENUE

SUITE 303

PALM BEACH, FL 33480

**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

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, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution.



**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE D  
NAME KAYALI, IBRAHIM  
STREET ADDRESS 6503 N MILITARY TRAIL SUITE 1803  
CITY-ST-ZIP BOCA RATON, FL 33496

TITLE P  
NAME KAYALI, FILIZ  
STREET ADDRESS 6503 N MILITARY TRAIL SUITE 1803  
CITY-ST-ZIP BOCA RATON, FL 33496

TITLE VP  
NAME AYTEMUR, ATILLA  
STREET ADDRESS 6503 N MILITARY TRAIL SUITE 1803  
CITY-ST-ZIP BOCA RATON, FL 33496

TITLE T  
NAME AYTEMUR, GUNGOR  
STREET ADDRESS 6503 N MILITARY TRAIL SUITE 1803  
CITY-ST-ZIP BOCA RATON, FL 33496

TITLE S  
NAME BRIAN, PHILIPPE J  
STREET ADDRESS 205 WORTH AVENUE SUITE 303  
CITY-ST-ZIP PALM BEACH, FL 33480

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U00000946566  
05/30/08-80053-024 150.00

**DO NOT WRITE  
IN THIS SPACE**

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:

*Philippe J. Brian* PHILIPPE J. BRIAN 04/30/08 5612144445

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #