## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000121331

Entity Name: DAZOO, INC.

FILED Apr 22, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1930 HARRISON ST., SUITE 503 1930 HARRISON STREET HOLLYWOOD, FL 33020

SUITE 503

HOLLYWOOD, FL 33020

**Current Mailing Address: New Mailing Address:** 

1930 HARRISON ST., SUITE 503 1930 HARRISON STREET HOLLYWOOD, FL 33020 SUITE 503

HOLLYWOOD, FL 33020

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HOCHZTEIN, FRED HOCHZTEIN, FRED 1930 HARRISON ST., SUITE 503 1930 HARRIŚON STREET HOLLYWOOD, FL 33020 SUITE 503 HOLLYWOOD, FL 33020 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: FRED HOCHSZTEIN 04/22/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition ( ) Delete Title:

PROBASCO, TIM PROBASCO, TIM Name: Name: 1225 SW 4TH CT., APT. A Address: 401 69TH STREET, #612 Address: City-St-Zip: FT. LAUDERDALE, FL 33312 City-St-Zip: MIAMI BEACH, FL 33141

I hereby certify that the information supplied with this filing does not qualify 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: TIM PROBASCO 04/22/2008 D