

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 22, 2008 8:00 am**  
**Secretary of State**

04-28-2008 90390 028 \*\*\*150.00

<b>DOCUMENT # P07000044605</b> 1. Entity Name <b>MAZDOC CORPORATION</b>																											
Principal Place of Business <b>8180 NW 36 STREET STE 420 MIAMI, FL 33166</b>		Mailing Address <b>8180 NW 36 STREET STE 420 MIAMI, FL 33166</b>																									
2. Principal Place of Business - No P.O. Box # <b>3650 NW 82nd Ave</b> Suite, Apt. #, etc. <b>405</b>		3. Mailing Address <b>3650 NW 82nd Ave</b> Suite, Apt. #, etc. <b>405</b>																									
City & State <b>DORAL, FL.</b>		City & State <b>DORAL, FL.</b>																									
Zip <b>33166</b>		Zip <b>33166</b>																									
Country <b>USA - Dade</b>		Country <b>USA - Dade</b>																									
4. FEI Number <b>26-0593846</b>		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>																									
6. Name and Address of Current Registered Agent  <b>ACOSTA, MAURICIO 8180 NW 36 STREET STE 420 MIAMI, FL 33166</b>		7. Name and Address of New Registered Agent Name <b>MAURICIO ACOSTA</b> Street Address (P.O. Box Number is Not Acceptable) <b>3650 NW 82nd Ave Ste 405</b> City <b>DORAL</b> <b>FL</b> <b>33166</b>																									
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 <u><i>Mauricio Acosta</i></u> / 4/24/08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																											
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 10%;">D</td> <td style="width: 10%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td colspan="2"><b>ACOSTA, MAURICIO</b></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"><b>8180 NW 36 STREET, STE 420</b></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td colspan="2"><b>MIAMI, FL 33166</b></td> </tr> </table>		TITLE	D	<input type="checkbox"/> Delete	NAME	<b>ACOSTA, MAURICIO</b>		STREET ADDRESS	<b>8180 NW 36 STREET, STE 420</b>		CITY - ST - ZIP	<b>MIAMI, FL 33166</b>		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 10%;">D</td> <td style="width: 10%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td colspan="2"><b>MAURICIO ACOSTA</b></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"><b>3650 NW 82nd Ave Ste 405</b></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td colspan="2"><b>DORAL, Florida 33166</b></td> </tr> </table>		TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	<b>MAURICIO ACOSTA</b>		STREET ADDRESS	<b>3650 NW 82nd Ave Ste 405</b>		CITY - ST - ZIP	<b>DORAL, Florida 33166</b>	
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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 or without other like empowered. SIGNATURE: <u><i>Mauricio Acosta</i></u> / 4/24/08 <small>Signature and typed or printed name of signing officer or director</small>																											

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