

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000102100

Entity Name: SAZ ENTERPRISE INC.

FILED  
Mar 13, 2008  
Secretary of State

## Current Principal Place of Business:

12717 W SUNRISE BLVD SUITE 272  
SUNRISE, FL 33323

## New Principal Place of Business:

12717 W SUNRISE BLVD  
SUITE 272  
SUNRISE, FL 33323

## Current Mailing Address:

12717 W SUNRISE BLVD SUITE 272  
SUNRISE, FL 33323

## New Mailing Address:

12717 W SUNRISE BLVD  
SUITE 272  
SUNRISE, FL 33323

FEI Number: 14-2007538

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PAREDES, STELLINA  
12717 W SUNRISE BLVD SUITE 272  
SUNRISE, FL 33323 US

## Name and Address of New Registered Agent:

PAREDES, STELLINA  
12717 W SUNRISE BLVD  
SUITE 272  
SUNRISE, FL 33323 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:

03/13/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete  
Name: CASTELLANOS, VANNIA  
Address: 12717 W SUNRISE BLVD SUITE 272  
City-St-Zip: SUNRISE, FL 33323

Title: T ( ) Delete  
Name: CASTELLANOS, VANNIA  
Address: 12717 W SUNRISE BLVD SUITE 272  
City-St-Zip: SUNRISE, FL 33323

Title: VP/D ( ) Delete  
Name: PAREDES, STELLINA  
Address: 12717 W SUNRISE BLVD SUITE 272  
City-St-Zip: SUNRISE, FL 33323

Title: S ( ) Delete  
Name: PAREDES, STELLINA  
Address: 12717 W SUNRISE BLVD SUITE 272  
City-St-Zip: SUNRISE, FL 33323

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: VANNIA CASTELLANOS

P/D

03/13/2008

Electronic Signature of Signing Officer or Director

Date