2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2009
Secretary of State

DOCUMENT# P07000102100

Entity Name: SAZ ENTERPRISE INC.

Current Principal Place of Business:

5751 NW 112TH AVE, APT 202
MIAMI, FL 33178

New Principal Place of Business:

Current Mailing Address:

5751 NW 112TH AVE, APT 202
MIAMI, FL 33178

New Mailing Address:

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 BVLD
SUITE 272
SUNRISE, FL 33323 US

Name and Address of New Registered Agent:

CASTELLANOS, VANNIA
5751 NW 112TH AVE
202
DORAL, FL 33178 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: VANNIA CASTELLANOS 03/13/2009
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 (X) Delete
Name: PAREDES, STELLINA
Address: 12717 W SUNRISE BLVD SUITE 272
City-St-Zip: SUNRISE, FL 33323

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change ( ) Addition
Name: CASTELLANOS, VANNIA
Address: 5751 NW 112TH AVE APT 202
City-St-Zip: DORAL, FL 33178

Title: T (X) Change ( ) Addition
Name: CASTELLANOS, VANNIA
Address: 5751 NW 112TH AVE APT 202
City-St-Zip: DORAL, FL 33178

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 03/13/2009
Electronic Signature of Signing Officer or Director Date