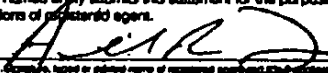


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Sep 09, 2008 8:00 am
Secretary of State

07-22-2008 90005 026 ***150.00

DOCUMENT: # P07000123193			
1. Entity Name PAZ BUSSINES INC.			
Principal Place of Business 5815 NW 44 AV FT LAUDERDALE, FL 33319		Mailing Address 5815 NW 44 AV FT LAUDERDALE, FL 33319	
2. Principal Place of Business - No P.O. Box # 5815 NW 44 AV		3. Mailing Address SAME AS ABOVE	
Suits, Apt. #, etc.		Suits, Apt. #, etc.	
City & State FT LAUDERDALE FL		City & State	
Zip 33319		Country Broward	
4. FEI Number 30-045-0627		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ZALAZAR, ARIEL 5815 NW 44 AV FT LAUDERDALE, FL 33319		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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  ARIEL R. ZALAZAR 07/17/08 DATE			
FILE NUMBER FOR IS \$150.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees In accordance with s. 607.180(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS PRESIDENT TITLE NAME STREET ADDRESS CITY - ST - ZIP Ariel R. Zalazar 5815 NW 44 AV FT LAUDERDALE FL 33319		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Change ☐ Addition TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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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 all other filers empowered.			
SIGNATURE:  ARIEL R. ZALAZAR 07/17/08 (94) 709 7286 DATE			

President