

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007 8:00 am
Secretary of State

01-22-2007 90098 028 ***150.00

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DOCUMENT # P92000007098 1. Entity Name PEZZI INTERNATIONAL CORP.			
Principal Place of Business 10300 NW S RIVER DR #1 BAY #1 MIAMI, FL 33178 US		Mailing Address 10300 NW S RIVER DR #1 BAY #1 MIAMI, FL 33178 US	
2. Principal Place of Business No P.O. Box # 777 NW 72nd Avenue		3. Mailing Address 777 NW 72nd Ave.	
Suite, Apt. #, etc. #2051		Suite, Apt. #, etc. #2051	
City & State Miami, Florida		City & State Miami, Florida	
Zip 33126		Zip 33126	
Country US		Country US	
4. FEI Number 65-0371368		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PEZZI, HAROLD 8340 SW 32 TERRACE MIAMI, FL 33155		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PEZZI, HAROLD 10300 NW S RIVER DRIVE BAY 1 MEDELY, FL	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PEZZI, SHELLEY 10300 NW S RIVER DRIVE BAY 1 MEDELY, FL	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PEZZI, SHELLEY 10300 NW S RIVER DRIVE BAY 1 MEDELY, FL	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 like empowered.			
SIGNATURE: <u><i>Shelley Pezzi</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date <u>1/17/07</u> Daytime Phone #	