FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED AND FILED

95 MAY 30 AM 11:20

200001501002
-05/30/95--01024--007
****200.00 ****200.00

DOCUMENT # P93000024123 (0)

1. Corporate Name
KAZAN ENTERPRISES, INC.

Principal Place of Business
4956 LECHALET BLVD. #11/12
BOYNTON BEACH FL 33436

Mailing Address
~~4956 LECHALET BLVD. #11/12~~
~~BOYNTON BEACH FL 33436~~
12941 INSHOR. DR
PALM. BEACH. GARDEN. S
FL. 33410

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/22/1993
3a. Date of Last Report: 04/29/1994

2. Principal Place of Business
21 SAME
Suite, Apt. #, etc.
22 SAME
City & State
23
Zip 24 County 25

2a. Mailing Address
26 ~~[illegible]~~
Suite, Apt. #, etc.
27 SAME
City & State
28
Zip 29 County 30

4. FEI Number: 65-0394016 — APPLIED FOR
Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. The corporation has filed for interpretive tax under S. 193.073 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
KAZANDJIAN, MARIE
4956 LE CHALET BLVD.
#11/12
BOYTON BEACH FL 33436

10. Name and Address of New Registered Agent
81 Name: NEW
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: (Signature of new registered agent or the President) (If Registered Agent resigns, signature required on reverse side.) DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	KAZANDJIAN, ZAVEN
STREET ADDRESS	112941 INSHORE DR.
CITY, ST, ZIP	PALM BEACH GARDENS FL 33410
TITLE	V
NAME	KAZANDJIAN, ZAVEN
STREET ADDRESS	4956 LE CHALET BLVD. #11-12
CITY, ST, ZIP	BOYTON BEACH FL 33436
TITLE	S
NAME	KAZANDJIAN, MARIE
STREET ADDRESS	4956 LE CHALET BLVD., #11-12
CITY, ST, ZIP	BOYTON BEACH FL 33436
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition

TITLE	
NAME	
STREET ADDRESS	SAME
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	SAME
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	SAME
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

REMITTED BY MAY 1

14. I hereby certify that the information supplied with this report is accurately transcribed and is true, and, for the corporation listed in Section 1 of this report, I further certify that the information indicated on the annual report or supplemental annual report filed for the year and that this signature shall have the same legal effect as under oath. I further certify that I am a duly elected or appointed officer or director or holder authorized to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or is attached herein with an address.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0204077 CP