

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 24 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000081473 (9)

1. Corporation Name

ARZEE INDUSTRIES, INC.



Principal Place of Business

Mailing Address

~~505 E 10TH AVENUE~~
~~HALEAH FL 33010~~
~~US~~

~~505 E 10TH AVENUE~~
~~201 S DISCAYNE BLVD STE 1070~~
~~HALEAH FL 33010~~
~~US~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 4880 NW 157th ST 26 4880 NW 157th ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State MIAMI, FL

27 City & State MIAMI, FL

23 Zip 33014 25 State FL

28 Zip 33014 30 State FL

3. Date Incorporated or Qualified

11/29/1993

4. FEI Number

65-0452700

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. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROBINSON JEFFREY

~~505 E 10TH AVENUE~~

~~HALEAH FL 33010~~

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

4880 NW 157th ST.

83

84 City

MIAMI

FL

85 Zip Code

33014

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this 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

Jeffrey Robinson, President

(NOTE: Registered Agent Signature required when reinstating)

DATE

3/8/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP
NAME ROBINSON JEFFREY
STREET ADDRESS ~~505 E 10TH AVE~~
CITY-ST-ZIP ~~HALEAH FL~~

☐ DELETE

TITLE DVP
NAME ZAMBITO STEVEN
STREET ADDRESS 505 E 10TH AVENUE
CITY-ST-ZIP HIALEAH FL

☐ DELETE

TITLE DEVT
NAME TAYLOR MICHAEL
STREET ADDRESS 505 E 10TH AVE
CITY-ST-ZIP HIALEAH FL

☒ DELETE

TITLE AS
NAME KNEAPLER CHARLES
STREET ADDRESS 505 E 10TH AVENUE
CITY-ST-ZIP HIALEAH FL

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Jeffrey Robinson

3/8/98

1-800-333-0659

CR2E034 (10/97)