## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

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**DOCUMENT #** 

P94000016865 (5)

E & Z LIMITED, INC.

2841 N. OCEAN BLVD., APT, 1803	2841 N. OCEAN BLVD., APT, 1803
Principal Place of Business	Mailing Address



	DALE FL 33308-7551	FT. LAUDERDALE F	L 333U6-755T		
				3. Date Incorporated or Qualified 02/28/1994	3a. Date of Last Report 05/01/1995
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. :	# ala	26		65-0471423	Not Applicable
22		Suite, Apt. #, etc. <b>27</b>		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for it	
24	25	29	30	Florida Statutes 🚺 Yes	
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New R	egistered Agent
			81 Name		
	ULAS, THOMAS A		82 Street Add	dress (P.O. Box Number is Not Acceptable	e)
	OCEAN BLVD., APT. 1803				
FT. LAU	DERDALE FL 33308-7551		83		
			84 City		85 Zip Code
			1 7 7 7		
familiar wit	ed agent, or both, in the State of Flo th, and accept the obligations of, Sec	uda. Buch chance was author	1Zed Dv. the corporation's boa	oration submits this statement for the purp and of directors. Thereby accept the appo	intment as registered agent. I am
SIGNATURE	Signature, typed or printed name of registeral hage		NOTE Registered Agent regnature require	·	DATE
TITLE	D OFFICERS AI	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	
NAME	METROULAS, THOMAS A	□ pett()t	1 1 DILE		Change Addition
STREET ADDRESS	2841 N. OCEAN BLVD., API	r 1000	1.2 NAME		
	FT. LAUDERDALE FL 33308		1.3 STREET ADDRESS		
CITY - ST - ZIP TITLE	· · · · · · · · · · · · · · · · · · ·		14 C TY - S1 - ZIP	- 10	
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certry 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 the corporation or the reserver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block in ordinary and attachment with a supplemental properties.

SIGNATURE:

SIGNATURE AND TAPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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