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

Mailing Address C/O WILLIAM J. BROWN

777 BRICKELL AVE. MIAMI FL 33131-2809

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

Principal Place of Business

C/O WILLIAM J. BROWN 777 BRICKELL AVE.

MIAMI FL 33131

DOCUMENT # P94000027142 (6)

AZIEC HOME & DEVELOPMENT CORP.

04/08/1994 04/26/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0486446 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 BROWN, WILLIAM J 777 BRICKELL AVE. Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33131** 83 84 City Zip Code 85 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 threetors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed home of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition TITLE 1.1 TITLE . ZUR, RAFAEL NAME 1.2 NAME TWO GROVE ISLE DRIVE STREET ACCRESS 1.3 STREET ADDRESS 1780 NW 127 Way COCUNUT GROVE FL CHY-S\*-ZIP 1.4 CITY-ST-ZIP Coral Springs, FL 33071 □ DELETE TITLE 2.1 TITLE .... Change Addition NAMI 22 NAME STREET ADDRESS 23 STREET ADDRESS OTY-ST-7IP 2. 4 CITY-ST-ZIP DELETE 3.1 TITLE Change Addition 3.2 NAME NAME 3.3 STREET AODRESS STREET ADDRESS 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

**6.3 STREET ADDRESS** 6.4 CITY-\$1-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

**SIGNATURE:** 

14. I do hereby certify that the intermation sopplied with this filinformation indicated on this annual report of sopplement

information indicated on this annual report I am an officer of director of the corporation appears in Block 12 or Block 13 if thange.

DITY: SY: 3P

STREET ADDRESS

STREET ADDRESS

City-St-ZiP

0-17 - \$1 - 21P

TITLE

N. Mi

TITLE

NAME

Rafael Zir "
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING DEFICER OR DIRECTOR

Vi sopplemen

DELETE

DELETE

does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

FAN 8, 1997 954-351-2003

Change

Change

Addition

Addition

FIL ED

Feb 14 1997 8:00am

Secretary of State

3a. Date of Last Report

3. Date Incorporated or Qualified