FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 5-1-91 B-5771 1996 P95000001075 (7) DOCUMENT # AZA VENTURES VII, INC. Maling Address Principal Place of Business 5752 VINTAGE OAKS CIRCLE 5752 VINTAGE OAKS CIRCLE **DELRAY BEACH FL 33484 DELRAY BEACH FL 33484** 3. Date Incorporated or Qualified 3a. Date of Last Report 01/04/1995 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 5-0562383 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be City & State City & State Trust Fund Contribution Added to Fees 23 8. This corporation has liability for intangible tax under s 199.032 Country Country Zip $Z\phi$ Florida Statutes Yes No 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name COBER CORPORATE AGENTS, INC. Street Address (P.O. Box Number is Not Acceptable) 82 2601 S. BAYSHORE DR. В3 19TH FLOOR MIAMI FL 33133 Zip Code 84 City 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 St.ct change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. (NO1E - Registered Agent signature required when reinstaling) Signature, typod or printed haline of registered agent and attent approable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 XX Change [] Addition DELETE 1.11000 **PSTD** TITLE Suttin, Eugene N. 1.2 NAME SUTTIN, EUGENE N NAME 5752 Vintage Oaks Circle 5752 VINTAGE OAKS CIRCLE 1.3 STREET ADDRESS STREET ADDRESS Delray Beach, FL 33484 **DELRAY BEACH FL 33484** 1.4 C(TY - ST- Z(P CITY-ST-ZIP ☐ Change ["] DELETE 2 1 1111 8 Addition TITLE 2.2 NAME NAME 23 STREET ADDRESS STREET ADDRESS 24 CHY- \$1- ZP CITY-ST-ZIP Change Addition DELFTE TITLE 3 1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CHY - S1 - 74P CITY-ST-ZIF DELETE 4. 1 TITLE TITLE NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - \$1 - 7P CHTY-\$1-7IP Change [7] Addition ["] DELETE 5. 1 TITLE TITLE 5.2 NAMÉ 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - S1 - 7IP CITY-S1-ZIP ["] DELETE Change Addition 6 1 THEF TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRÉSS 64 CHY-ST-ZIP

SIGNATURE:

oath; that I am an officer or dire appears in Block 12 or Block

CITY-ST-ZIP

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Gene Guttin

n arī altachment with an address

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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

CR2E034 (12/95)