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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000034825 (6)

HAAZ II, INC.

Principal Place of Business

Mailing Address

FILED May 08 1997 8:00am Secretary of State



425 W COLONIAL DRIVE #101 ORLANDO FL 32804		425 W OOLONIAL DRIVE #101 Orlando FL 32804-6863			ĺ					
						3. Date incorporated or Qualified 05/04/1995	1 .	ate of Last Re 16/1996	eport	
2. Principal Pi	lace of Business	2a. Mailing Address	2 /	. ,	$\frac{1}{\lambda}$	4. FEI Number			plied For	
21 730	W. Colonial or		olon	ial e	<u>86</u>	59-3312583			ot Applicable	
Suite, Apl.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 / Fee Re		
City & State 23 Onlando F/ 28 Orlando			FI			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip 39	1804 Country US A	Zip 2 3 2 4	Count	us 1	4	This corporation has liability for Florida Statutes		tax under s.	199.032,	
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Re	gistered	Agent		
KAN	uł, azina		8	Name						
425 W COLONIAL DRIVE #101 ORLANDO FL 32804				82 Street Address (P.O. Box Number is Not Acceptable)						
			8:	<u> </u>				1	-	
			8	City			FL	 85 Zip 0	Code	
office or re	to the provisions of Sections 607.050 ogistered agent, or both, in the Stato m familiar with, and accept the obliga	of Florida, Such change was au	thorized b	v the corpo	orpor	ration submits this statement for the policy accepts the policy accepts accept	purpose of pt the app	changing it ointment as	s registered registered	
SIGNATURE	Stgramine, typed or product name of registered age	nt and title it applicable. (NOTE:	Registered A	gent signature n	equired	when reinstating)	DATE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	CERS AND		IS IN 12	
TITLE	PVS	☐ DELETE	1.1 TITLE					Change	☐ Addition	
NAME	KANJI, AZINA		1.2 NAMI		٠,-	- 13 // 1	0	λ.		
STREET ADDRESS	425 W COLONIAL DRIVE #101		1.3 STRE	T ADDRESS	/5	o W. Coloni	a C	Briv		
CITY - SI - 7IP	ORLANDO FL 32804		1.4 CITY	ST-ZIP	_ <u>c</u>	erlando Fl	<u>ح ک</u>			
TITLE		DELETE	2.1 TITLE	ļ				☐ Change	Addition	
NAME			2.2 NAMI	[
STREET ADDRESS			1	T ADDRESS						
CITY-ST-ZIF		DELETE	2. 4 CITY	- ST- ZIP				Change	Addition	
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NAME			4. 2 NAM							
STREET ADDRESS				T ADDRESS						
CITY ST-ZIE			4.4 CITY	- 1						
TITLE		DELETE	5.1 TITLE	<u></u>		· · · · · · · · · · · · · · · · · · ·		☐ Change	Addition	
NAMÉ			5.2 NAM	: 1				-		
STREET ADDRESS			1	ET ADDRESS						
CITY - ST - ZIP			5.4 CITY							
TITLE		DELETE	6.1 TITLE					Change	Addition	
NAME			6.2 NAM	: }						
STREET ADDRESS			6.3 STRE	ET ADDRESS						
CITY-ST-ZIP			6.4 CITY							
	by certify that the information supplies	d with this filing does not qualify	for the ex	emption st	ated in	n Section 119.07(3)(i), Florida Statute	s. I furthe	r certify that	the	

14. I do hereby certify that the information supplied with this filing does not quality 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 thanged, or on an attachment with an address.

SIGNATURE

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4-24-97

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