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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P95000054014 1. Corporation Name

NAZET, INC.

## **FILED** Jan 23, 1999 8:00am **Secretary of State**

01-23-1999 90041 024 \*\*\*150.00



		6.4 167 A 1.4			l .			
Principal Place		Mailing Address	ın.		•		•	
700 E. DANIA 8	BEACH BLVD.	700 E. DANIA BEACH BLV SUITE 202	U.					
Suite 202   Dania Fl. 33004		DANIA FL 33004		DO NOT WRITE IN THIS SPACE				
DAME LE COO		<b>6</b> , 1, 1, 1, 1			3. Date Incorporated or Qualifed 07/13/1995			
2. Principal Pl	lace of Business	2a. Mailing Address			4, FEI Number	Apr	plied For	
21	•	26			65-0606800	No	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	•		5. Certificate of Status Desired	\$8.75 ₽		
22	•	27			5. Certificate of Status Desired	Fee Re	quired	
City & State	e	City & State			6. Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution	Added t	o Fees	
Zip	Country	Zip	Count	ry	8. This corporation owes the current year Into		<b>√</b>	
24	25	29	30		Personal Property Tax.	☐ Yes	No	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered	Agent		
			8	1 Name				
VIVIES, PATRICK 700 E. DANIA BEACH BLVD.		82		2 Street A	eet Address (P.O. Box Number is Not Acceptable)			
	E 202		18	13				
DANI	IA FL 33004						7.5 (4)	
			8	4 City	FL	85 Zip C	Code	
	2 11 207.05	02 and 607 1609 Florido Statut	toc the abo	we named o	omaration submits this statement for the nurnose of	changing its	registered	
Office or re	agreement agent of both in the State	a of Florida. Silon change was a	aumonzeo r	ov me coroor	ration's board of directors. I hereby accept the appoin	ntment as re	gistered	
agent. I ar	m familiar with, and accept the oblig	ations of, Section 607.0505, Flo	orida Statut	es.		•		
SIGNATURE					juired when reinstating) DATE		i	
i e	Signature, typed or printed name of registered age	ent and title if applicable INO D						
				John Signature 194		D DIRECTO	RS IN 12	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO	RS IN 12	
<b>12.</b> TITLE	OFFICERS A		13. 1.1 TITU					
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CITY-ST-ZIP 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, pron an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS