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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED** 

Apr 14 1998 8:00am

Secretary of State

DOCUMENT # P95000097179 (2)

| SAZC.                    | INC.  |  |                                      |  |   |
|--------------------------|---|--|--------------------------------------|--|---|
| Principal Plac           | ce of Business  | Mailing Address  |                                      | 1 1001/5001 110 (010/ 8111) 80111 8311/ 4811/ 8811/  | E (B)() (BBB) () (B) (B) (B) (B) (B)                    |
| 1109 OCEAN DUNES CIR     |   | 1109 OCEAN DUNES CIR   | <b>!</b>                             |  |   |
| JUPITER FL 33477         |   | JUPITER FL 33477   | •                                    | DO NOT MIDITE IN TO  | HO DDA OF   |
|                          |   |  |                                      | DO NOT WRITE IN THE 3. Date Incorporated or Qualified  | TIS SPACE   |
|                          |   |  |                                      | 12/27/1995   |   |
| 2, Principal F           | Place of Business   | 2a. Mailing Address  |                                      | 4. FEI Number  | Applied For   |
| 21                       |   | 26   |                                      | 65-0634158   | Not Applicable  |
| Suite, Apt.              | . #, etc.   | Suite, Apt. #, etc.  |                                      | 5. Certificate of Status Desired   | \$8.75 Additional                                       |
| 22                       |   | 27   |                                      | C. Commodic of States Desired  | Fee Required  |
| City & Stat              | 10  | City & State   |                                      | 6. Flection Campaign Financing Trust Fund Contribution   | <b>\$5.00</b> May Be                                    |
| <b>23</b> Zip            | Country   | <b>28</b> ]  | Country                              | Trust Fund Contribution    8. This corporation owes or has paid the  | Added to Fees   |
| 24                       | 25  | 29   | 30                                   | Personal Property Tax due June 30.   | Yes No  |
| <del></del>              | 9. Name and Address of Curre  |  |                                      | 10. Name and Address of New Register   |   |
| MA                       | ARTIN, JERRY I  |  | 81 Name                              |  |   |
| AAAA AAFAN BUNIFA AIR    |   |  |                                      | ess (P.O. Box Number is Not Acceptable)  |   |
|                          | PITER FL 33477  |  | On out Addit                         | oss (1.0. Box Harrison a Hot Acceptable)   |   |
|                          |   |  | 83                                   |  |   |
|                          |   |  | 84 City                              |  | - 85 Zip Code   |
|                          |   |  |                                      | <b>[</b>   | <b>-L</b>     `   |
| 11. Pursuant office or i | to the provisions of Sections 607.05 registered agent, or both, in the Stat | 02 and 607-1508, Florida Statute<br>e of Florida-Such change was a | es, the above-named corporation      | oration submits this statement for the purposion's board of directors. I hereby accept the   | se of changing its registered appointment as registered |
| agerit. I a              | am familiar with, and accept the obli                                       | gations of, Section 607.0505, Flo                                  | rida Statutes.                       | ,  | ·   |
| SIGNATURE                | Signature, typical or printed harne of registers it is                      | * 1.50 4.5 1.31  | F Registered Agent signature require |  |   |
| 12,                      | ·   | VD DIRECTORS   | 13.                                  | ed when reinstaring) DAT ADDITIONS/CHANGES TO OFFICERS (   |   |
| TITLE                    | <u>D</u>  | DELETE   | 1.1 TIDLE                            | , apply of the control of the contro | Change Addition   |
| NAME                     | MARTIN, JERRY I   |  | 1.2 NAM[                             |  | ·   |
| STREET ADORESS           | 1109 OCEAN DUNES CIR  |  | 1.3 STREET ADDRESS                   |  |   |
| CITY-ST-ZIP              | JUPITER FL 33477  |  | 1.4 CHY+\$1+ZIP                      |  | •   |
| TITLE                    |   | DELETE   | 2 1 1ITLF                            |  | Change Addition   |
| NAME                     |   |  | 2.2 NAME                             |  |   |
| STREET ADDRESS           |   |  | 2 3 STREET ADDRESS                   |  |   |
| CITY-ST-ZIP              |   | · • • • • • • • • • • • • • • • • • • •                            | 2 4 CITY-ST - ZIP                    |  |   |
| TITLE                    |   | DETE LE  | 3.1 TITLE                            |  | Change Addition   |
| NAME<br>OTOTET ADDRESS   |   |  | 3.2 NAME                             |  |   |
| STREET ADDRESS           |   |  | 3.3 STREET ADDRESS                   |  |   |
| DITY-ST-ZIP<br>TITLE     |   | DILLETE  | 3.4. CHY- S1-2IP<br>4.1 THLE         |  | Change Addition   |
| NAME                     |   | Ecold Service  | 4. 2 NAME                            |  |   |
| STREET ADDRESS           |   |  | 4.3 STREET ADDRESS                   |  |   |
| CiTY-ST-ZIP              |   |  | 4.4 CITY - S1 - ZIP                  |  |   |
| TITLE                    | 1000  | DELETE   | 5.1 TITLE                            | 1 / / / / L   A   A   A   A   A   A   A   A   A  | Change Addition   |
| NAME                     |   |  | 5.2 NAME                             |  |   |
| STREET ADDRESS           |   |  | 5.3 STREET ADDRESS                   |  |   |
| CITY-ST-ZIP              |   |  | 5.4 CHY-S1-ZIP                       |  |   |
| TITLE                    |   | DELETE   | 61 DILF                              |  | Change Addition   |
| NAME                     |   |  | 62 NAME                              |  |   |
| STREET ADDRESS           |   |  | 6 3 STREET ADDRESS                   |  |   |
| City-St-7/P              |   |  | 64 City-St-ZiP                       |  |   |

14. Thereby 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 early; that I am an officer or director of the corporation of 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 of an an attachment with an address.