

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

FILED  
Mar 26 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000017354 (7)

1. Corporation Name

ORZAN INTERNATIONAL, INC.



Principal Place of Business  
8546 SOUTHWEST 8 STREET  
MIAMI FL 33144

Mailing Address  
8546 SOUTHWEST 8 STREET  
MIAMI FL 33144

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/26/1996

4. FEI Number

65-0643894

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22. City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27. City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

NONES, LARRY P  
1985 NW 88 CT  
STE 201  
MIAMI FL 33172

10. Name and Address of New Registered Agent

81

Name

LOURDES V. ORJALES

82

Street Address (P.O. Box Number is Not Acceptable)

8546 SW 8 STREET

83

84

City

MIAMI

FL

85

Zip Code

33144

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 directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*Loures V. Orjales*

LOURDES V. ORJALES

3/19/98

(Signature, typed or printed name of registered agent, and date if applicable)

(NOTE: Registered Agent signature required when formulating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME ORJALES, LOURDES V  
STREET ADDRESS 8546 SOUTHWEST 8 STREET  
CITY-ST-ZIP MIAMI FL 33144

TITLE STD ☐ DELETE

NAME BERMUDEZ, MARIA ELENA  
STREET ADDRESS 8546 SOUTHWEST 8 STREET  
CITY-ST-ZIP MIAMI FL 33144

TITLE D ☐ DELETE

NAME PADRON, MARTHA  
STREET ADDRESS 8546 SOUTHWEST 8 STREET  
CITY-ST-ZIP MIAMI FL 33144

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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, or on an attachment with an address.

SIGNATURE *Loures V. Orjales* (305) 318 4947

CR2E034 (10/97)