


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 22, 2004 8:00 am**  
**Secretary of State**

03-22-2004 90060 018 \*\*\*150.00

<b>DOCUMENT # P96000045935</b> 1. Entity Name <b>COOPER CITY COMMERCE CENTER, INC.</b>			
Principal Place of Business 12399 SW 53 ST COOPER CITY, FL 33330 US		Mailing Address 3121 W HALLANDALE BCH BLVD STE 101 PEMBROKE PINES, FL 33009 US	
2. Principal Place of Business <b>3001 W Hallandale Bch Blvd</b>		3. Mailing Address <b>3001 W Hallandale Bch Blvd</b>	
Suite, Apt. #, etc. <b>Suite 300</b>		Suite, Apt. #, etc. <b>Suite 300</b>	
City & State <b>Pembroke Park, FL</b>		City & State <b>Pembroke Park, FL</b>	
Zip <b>33009</b>	Country <b>USA</b>	Zip <b>33009</b>	Country <b>USA</b>
4. FEI Number <b>65-0674603</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>		<b>7. Name and Address of New Registered Agent</b>	
<b>JAZAYRI, SAM</b> <b>3121 W HALLANDALE BCH BLVD STE 121</b> <b>PEMBROKE PINES, FL 33009</b>		Name  Street Address (P.O. Box Number is Not Acceptable)  City  <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
<b>3001 W Hallandale Bch Blvd</b> <b>Suite 300</b> <b>Pembroke Park, FL 33009</b>			
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>			
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE <b>STD</b>	NAME <b>TAVONE, JOHN H</b>	<input type="checkbox"/> Delete	
STREET ADDRESS <b>12399 S.W. 93RD ST. SUITE 101</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY-ST-ZIP <b>COOPER CITY, FL 33330</b>			
TITLE <b>PD</b>	NAME <b>JAZAYRI, SAM</b>	<input type="checkbox"/> Delete	
STREET ADDRESS <b>3121 W HALLANDALE BCH BLVD STE 102</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY-ST-ZIP <b>PEMBROKE PARK, FL</b>			
TITLE  	NAME  	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS  			
CITY-ST-ZIP  			
TITLE  	NAME  	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS  			
CITY-ST-ZIP  			
TITLE  	NAME  	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS  			
CITY-ST-ZIP  			
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
<b>SIGNATURE:</b> _____		<b>Sam Jazayri</b>	<b>3/17/04</b>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>	<small>Daytime Phone #</small>