

FILED
Apr 04, 2008 08:00 AM
Secretary of State

1. Entity Name
COOPER CITY COMMERCE CENTER, INC.



Mailing Address
3001 W HALLANDALE BEACH BLVD.
STE. 300
PEMBROKE PARK, FL 33009 US

DO NOT WRITE IN THIS SPACE



03252008 No Chg-P CR2E034 (11/05)

4. FEI Number	Applied For
65-0674603	Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

JAZAYRI, SAM
3001 W HALLANDALE BEACH BLVD.
STE. 300
PEMBROKE PARK, FL 33009

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be
Added to Fees

000000880628
04/15/08-80068-012 150.00

10.	OFFICERS AND DIRECTORS
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TITLE	STD
NAME	TAVONE, JOHN H
STREET ADDRESS	3055 HARBOR DR., APT. 1502
CITY-ST-ZIP	FORT LAUDERDALE, FL 33316

TITLE	PD
NAME	JAZAYRI, SAM
STREET ADDRESS	3001 W HALLANDALE BEACH BLVD., STE. 300
CITY - ST - ZIP	PEMBROKE PARK, FL 33009

TITLE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/08 954 981 1154