2007 FOR PROFIT CORPORATION

May 02, 2007 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # P96000055808** 05-02-2007 90063 006 ***150.00 1. Entity Name RAZ PROPERTIES, INC. Principal Place of Business Mailing Address 3300 N. 29TH AVE. #101 3300 N. 29TH AVE. #101 HOLLYWOOD, FL 33020 HOLLYWOOD, FL 33020 No Chq-P CR2E034 (11/05) 04272007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0692958 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent BENNETT, DAVID L III DO NOT WRITE 3300 N. 29TH AVE. #101 HOLLYWOOD, FL 33020 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. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME DAVID, BENNETT L III STREET ADDRESS 3300 N. 29TH AVENUE, #101 CITY-ST-ZIP HOLLYWOOD, FL 33020 TITLE NAME ZASTENIK, RALPH STREET ADDRESS 3300 N. 29TH AVE., STE 101 CITY-ST-ZIP HOLLYWOOD, FL 33020 TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 trusted 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 attactment with an address. With all other like empowered changed, or on an attachment with , with all other like empowered.

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS

NO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED