

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P96000084585

Entity Name: AZAR INDUSTRIES, INC.

**FILED**  
**Aug 21, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

719 EAST UNION ST.  
JACKSONVILLE, FL 32206 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 5662  
JACKSONVILLE, FL 322475662 US

**New Mailing Address:**

FEI Number: 59-3438790

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

AZAR, RAYMOND P  
719 EAST UNION ST.  
JACKSONVILLE, FL 32206 US

**Name and Address of New Registered Agent:**

AZAR, PHILLIP  
719 EAST UNION ST.  
JACKSONVILLE, FL 32206 US

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.

SIGNATURE: PHILLIP AZAR

08/21/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: AZAR, SANDRA  
Address: 3855 SAN JOSE BLVD.  
City-St-Zip: JACKSONVILLE, FL 32207

Title: PRES  
Name: AZAR, RAYMOND  
Address: 3555 SAN JOSE BLVD.  
City-St-Zip: JACKSONVILLE, FL 32207

Title: VPST  
Name: AZAR, PHILLIP  
Address: 3946 GASDEN ROAD  
City-St-Zip: JACKSONVILLE, FL 32207

Title: VP  
Name: AZAR, JOHN C  
Address: 3855 SAN JOSE BLVD.  
City-St-Zip: JACKSONVILLE, FL 32207

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: PHILLIP AZAR

VPST

08/21/2014

Electronic Signature of Signing Officer or Director

Date