

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 NOV 10 PM 12: 27

PROFIT CORPORATION ANNUAL REPORT 1998 1999	FLORIDA DEPARTMENT OF STATE Sandra B. Northing Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000049997
1. Corporation Name
J.A.Z. Properties, Inc.

Principal Place of Business 50 N.E. 26th Avenue, # 203 Pompano Beach, FL 33062	Mailing Address Same
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DO NOT WRITE IN THIS SPACE
3. Date Incorporated or Qualified
June 5, 1997

2. Principal Place of Business 21 Suits, Apt. #, etc. 22 City & State 23 Zip	2a. Mailing Address 26 Suits, Apt. #, etc. 27 City & State 28 Zip	29 Country	30 Country
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4. FEI Number 65-0760967	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
Zargaran, Ali Reza
50 N.E. 26th Avenue, # 203
Pompano Beach, FL 33062

10. Name and Address of New Registered Agent
01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City
05 Zip Code
FL

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 607.0508, Florida Statutes.
SIGNATURE Ali Reza Zargaran, President
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)
11/1/99 DATE

12. OFFICERS AND DIRECTORS

TITLE	P/V/S/T/D	<input type="checkbox"/> DELETE
NAME	Ali Reza Zargaran	
STREET ADDRESS	50 N.E. 26th Avenue, # 203	
CITY-ST-ZIP	Pompano Beach, FL 33062	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	900003052249--5
2.4 CITY-ST-ZIP	-11/23/99--01004--011
3.1 TITLE	***158.75 <input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	AD
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: Ali Reza Zargaran, President 11/1/99 954-942-8987

CR2E034 (10/97)

J.A.Z. Properties, Inc.
50 N.E. 26th Avenue, # 203
Pompano Beach, FL 33062

November 1, 1999

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

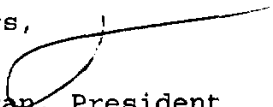
Re: J.A.Z. Properties, Inc. (P97000049997) Annual Report

Dear Sir or Madam,

We became aware through a search of the internet that our company is not active due to nonreceipt of our annual report. We have no record of having received this report. Therefore, we have enclosed a check payable to the Department of State in the amount of \$158.75, representing the annual fee of \$150.00, and for the certificate of status fee of \$8.75.

Please accept our report and our payment as payment in full as we did not receive your annual report. Thank you for your consideration and cooperation in this matter. Thank you for your assistance.

Very Truly Yours,


Ali Reza Zargaran, President