


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 13, 2007 8:00 am
Secretary of State

07-13-2007 90089 026 ***558.75

DOCUMENT # P98000106112

1. Entity Name
 325 ALCAZAR HOLDING CORP.



Principal Place of Business Mailing Address

~~7255 NW 19 ST.~~ ~~7255 NW 19 ST.~~
 STE B STE B
 MIAMI, FL 33126 MIAMI, FL 33126

*7051 SW 12th St
 MIAMI FL 33144* *7051 SW 12th St
 MIAMI FL 33144*



07092007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0888209	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MURAI, WALD, BIONDO & MORENO, P.A.
 900 INGRAHAM BUILDING
 25 SOUTHEAST 2ND AVENUE
 MIAMI, FL 33131

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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 _____

FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ARELLANO, AGUSTIN R 7255 NW 19 ST., STE B <i>7051 SW 12th St MIAMI FL 33144</i> MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ARELLANO, MARIA 7255 NW 19 ST., STE B <i>7051 SW 12th St MIAMI FL 33144</i> MIAMI, FL 33126
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 reports 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]* Date: *7/9/07* Daytime Phone # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR