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2004 FOR PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # S16730 1. Entity Name AZA VENTURES IV, INC.				۱ ۶ الال ۱۹۵	H-4 PHIZ: 3	0 5.TE 10.A	
Principal Place of Business ##################################				SEC? TALL	attassee.		
2. Principal Place of Business 4205 West Atlantic Ave	3. Mailing Address 4205 West Atla	antic Av					
Suite, Apt. #, etc.	Suite, Apt. #, etc.	411010 111	05212004	Chg-P	CR2E034 (10/0)	3 \	
Suite 201	Suite 201				· · · · · · · · · · · · · · · · · · ·		
City & State	City & State		4. FEI Number 65-025		}	Applied For Not Applicable	
Delray Beach, Fl	De<u>l</u>ray Beach,			\$9.75			
33445	33445		5. Certificate	of Status Desired	Fee Requ		
6. Name and Address of Current R	egistered Agent		7. Name and	Address of New I	Registered Agent		
SUTTIN, EUGENE N		Name					
KANAX XIM RAGENOK X & R. 4205 West Atlantic Ave Street Address (IXXX XIXXX X X X X X X X X X X X X X X			ess (P.O. Box Numb	P.O. Box Number is Not Acceptable)			
The state of the s	Beach, FL						
== =2	33445	City			FL Zip C	ode	
8. The above named with submits this statement for		stered office or red	gistered agent, or bo	th, in the State of Fl		th, and accept	
the obligations of registered agent.	Eugene N. Sutt	·			6/2/04	,	
SIGNATURE Signature, typed or printed name of registered agent an	d title if applicable. (NOTE: Regis	istered Agent signature re	equired when reinstating)		DATE		
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004	9. Election Campaign F Trust Fund Contributi		\$5.00 May Be Added to Fees				
10. OFFICERS AND D	IRECTORS	11.	ADDITIONS,	CHANGES TO OFF	FICERS AND DIRECTO	ORS IN 11	
TITLE DPST		TITLE			⊁ X Chang	e 🗌 Addition	
NAME SUTTIN, EUGENE STREET ADDRESS CITY-ST-ZIP SECURITY ST-ZIP SECURITY ST-ZIP			205 West		c Ave; St	e. 201	
TITLE NAME		TITLE NAME	ETTAY DE	acu, et	☐ Chang	e Addition	
STREET ADDRESS		STREET ADDRESS	_				
CITY-ST-ZIP		CITY-ST-ZIP	4	DUDRY	796974	- -n -nn	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADORESS CITY-ST-ZIP	0670	3/U4~ <u>-</u> U1U2	19001 *chang	30 - El-Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Chang	e Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Chang		
12. I hereby certify that the information supplied with t indicated on this report or suppliemental report is t of the corporation or the receive for trustee empoy changed, or on an attachment with an address, wi	this filling does not qualify for the true and accurate and that my signered to execute this report as reith all other like empowered.	exemption stated gnature shall have equired by Chapte	in Section 119.07(3) the same legal effect tr 607, Florida Statute	(i), Florida Statutes. et as if made under es; and that my nam	I further certify that the oath; that I am an office appears in Block 10	e information cer or director or Block 11 if	
SIGNATURE: SIGNATURE AND TYPED OR PR	INTED NAME OF SIGNING OFFICER OR DI Suttin, Presi	RECTOR		6/2/04 Date	56 1-496-	899	

INTAGE PROPERTIES.

June 2, 2004

Division of Corporations 2670 Executive Center Circle Suite 100 Tallahassee, FL 32301

To Whom It May Concern:

This letter will certify the AZA Ventures IV, Inc. did not receive it's 2004 for Profit Corporation Annual Report. It is my understanding that since we did not receive our filing report that the late fee will be waived.

Please find our check in the amount of \$ 150.00 along with the reporting form for this years filing.