FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION **FILED** Sandra B. Mortham ANNUAL REPORT Apr 29 1996 8:00 am Secretary of State 1996 DIVISION OF CORPORATIONS Secretary of State **DOCUMENT #** S38907 (9)AMAZEN ENTERPRISES, INC. Principal Place of Business Mailing Address 3131 S FEDERAL HWY 3131 S FEDERAL HWY FT LAUDERDALE FL 33316 FT LAUDERDALE FL 33316 3. Date incorporated or Qualified 3a. Date of Last Report 2. Principal Place of Business 03/13/1991 03/17/1995 2a. Mailing Address 4. FEI Number 21 Applied For 26 Suite, Apt. #, etc. 65-0246938 Not Applicable Suite, Apt. #, etc. 22 5. Certificate of Status Desired \$8.75 Additional City & State City & State Fee Required 23 6. Election Campaign Financing 28 \$5.00 May Be Trust Fund Contribution Ζıp Added to Fees Z_{ip} Country 24 8. This corporation has liability for intangible tax under s 199.032, 25 29 30 9. Name and Address of Current Registered Agent Florida Statutes Yes No 10. Name and Address of New Registered Agent 81 Name WORLDWIDE CORPORATE SERVICES INC ONE FINANCIAL PLZ Street Address (P.O. Box Number is Not Acceptable) STE 2626 83 FT LAUDERDALE FL 33394 R4 City 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating 12. OFFICERS AND DIRECTORS 13. TITLE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (12/95)DELETE 1. 1 TITLE AVADALLAH, MAZER NAME ☐ Change ■ Addition 1.2 NAME 22500 LABRADOR STREET STREET ADDRESS CR2E034 1.3 STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL** 1.4 CITY-ST-ZIP TITLE DELETE 2.1 THUE NAME Change ☐ Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3. 1 TITLE NAME Change Addition 3.2 NAME STREET ADDRESS 3.3. STREET ADDRESS CITY - ST - ZIE 3.4 CITY - ST - ZIP THEE □ DELETE 4. 1 TITLE NAME Change ☐ Addition 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TULE ☐ DELETE 5. 1 TITLE NAME Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6. 1 TITLE NAME Change ■ Addition **6.2 NAME** STREET ADDRESS 6.3 STREET ADDRESS 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: SIGNATURE AND TYPED OR PRINT

ING OFFICER OR DIRECTOR