

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S83909

Entity Name: JAZ ATHLETIC WEAR, INC.

FILED  
Apr 21, 2009  
Secretary of State

## Current Principal Place of Business:

13055 BIRD ROAD  
SUITE 204  
MIAMI, FL 33185 US

## New Principal Place of Business:

## Current Mailing Address:

13055 BIRD ROAD  
SUITE 204  
MIAMI, FL 33185 US

## New Mailing Address:

FEI Number: 65-0176770      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARCOTE, ADELA Z  
2100 BAY DRIVE  
POMPANO BEACH, FL 33062 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: S ( ) Delete  
Name: JUAN R MARCOTE  
Address: 5825 SW 82 AVE .RD.  
City-St-Zip: MIAMI, FL 33165

Title: T ( ) Delete  
Name: ZIOMARA MARCOTE  
Address: 5825 SW 82 AVE. RD.  
City-St-Zip: MIAMI, FL 33165

Title: P ( ) Delete  
Name: MARCOTE, ADELA Z  
Address: 15827 SW 44 ST.  
City-St-Zip: MIAMI, FL 33185

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ADELA Z. MARCOTE

P

04/21/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date