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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # **V28639**

## **FILED** Feb 15, 1999 8:00 am Secretary of State

02-15-1999 90026 013 \*\*\*150.00

| MAZOR'S   | ENTERPRIS  | ES, INC.                                     |  |   |  |  |  |                        |                            |                              |
|---|--|--|--|---|--|--|--|------------------------|----------------------------|------------------------------|
| Principal Place   | of Business  |  | Mailing Address  |   |  |  |  |                        |                            |                              |
| 7957 NW 54TH ST.<br>MIAMI FL 33166  |  | 7967 NW 54TH ST.<br>MIAMI FL 33166           |  |   |  | DO NOT WRITE IN THIS SPACE   |  |                        |                            |                              |
| us  |  |  | US   |   |  |  | 3. Date Incorporated or Qualifed   |                        |                            |                              |
|   |  |  |  |   |  |  | 04/10/1992   | <del></del>            | A = +11                    |                              |
| 2. Principal Pla  | ice of Business  |  | 2a. Mailing Address  |   |  |  | 4. FEI Number  | ŀ                      |                            | ed For<br>Applicable         |
| 1   |  | 26   |  |   |  | 65-0343842   | . \$8  |                        |                            |                              |
| Suite, Apt. #, etc.   |  | Suite, Apt. #, etc.                          |  |   |  | 5. Certificate of Status Desired \$8.75. Addition Fee Required   |  |                        |                            |                              |
| 2   |  |  | City & State   |   |  |  | 6. Election Campaign Financing \$5.00 May Be   |                        |                            |                              |
| City & State  |  | 28   |  |   |  | Trust Fund Contribution  Added to Fees   |  |                        |                            |                              |
| 23  |  | Country                                      | Zip  | C   | ountry   |  | 8. This corporation owes the curre   | nt year Intangible     | , _                        | <b>.</b>                     |
| Zip   | 25   | Journal                                      | 29   | 30  |  |  | Personal Property Tax.   | L Ye                   | s L                        | No                           |
| 24  | 9 Name and   | Address of Curren                            | t Registered Agent   |   |  |  | 10. Name and Address of New R  | egistered Agent        |                            | <del></del>                  |
|   | J. Hambure   |  |  |   | 81   | Name   |  |                        |                            |                              |
| MAZOR, DAVID<br>7957 NW 54TH ST.<br>MIAMI FL 33166  |  |  |  |   | 82   | Street Addr  | ress (P.O. Box Number is Not Acceptable)   |                        |                            |                              |
|   |  |  |  |   | 83   |  | 1  | <b>达到影到</b> 数据         | 3 414 N                    |                              |
| IAITCAIA  | 11 1 2 30 100  |  |  |   | 84   | City   | The state of the s | E1 85                  | Zip Co                     | ode                          |
|   |  |  |  |   | 1 }  |  |  | - L                    | ing its r                  |                              |
| 11. Pursuant t  | to the provisions  | of Sections 607.050<br>or both, in the State | 02 and 607.1508, Florida S<br>of Florida. Such change w                      | tatutes, the  | e above  | e-named corp<br>the corporati  | poration submits this statement for the ion's board of directors. I hereby accept  | t the appointmen       | t as regi                  | egistered<br>istered         |
|   |  | ted name of registered age                   | ant and title if applicable  | (NOTE: Registe  | ered Agen  |  | poration submits this statement for the ion's board of directors. I hereby accepted when reinstating)  | DATE                   |                            |                              |
|   | Signature, typed or prin   | ted name of registered age                   | ant and title if applicable.   | (NOTE: Registo  | ered Agen  |  | ADDITIONS/CHANGES TO OF  | DATE<br>FICERS AND DIF |                            |                              |
| SIGNATURE   | Signature, typed or prin   | of registered age                            | ant and title if applicable  | (NOTE: Registo  | ered Agen<br>13.<br>.1 TITLE   |  | ed when reinstating) `. ( '. i'.'  | DATE<br>FICERS AND DIF | RECTOR                     | RS IN 12                     |
| SIGNATURE  12.  TITLE  NAME   | Signature, typed or prin<br>PD<br>MAZOR, MIRI  | OFFICERS AN                                  | ant and title if applicable.   | (NOTE: Registr  | ered Agen<br>13.<br>.1 TITLE<br>.2 NAME  | nt signature require   | ADDITIONS/CHANGES TO OF  | DATE<br>FICERS AND DIF | RECTOR                     | RS IN 12                     |
| SIGNATURE  12. TITLE NAME STREET ADDRESS  | PD<br>MAZOR, MIRI<br>9980 S.W. 13  | OFFICERS AN                                  | ant and title if applicable.  ND DIRECTORS                                   | (NOTE: Registr  | ered Agen  13.  1 TITLE  2 NAME  3 STREET  | nt signature require   | ADDITIONS/CHANGES TO OF  | DATE FICERS AND DIF    | RECTOF                     | RS IN 12                     |
| SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP  | PD<br>MAZOR, MIRI<br>9980 S.W. 13<br>MIAMI FL 33   | OFFICERS AN                                  | ant and title if applicable.  ND DIRECTORS                                   | (NOTE: Register 1   | ered Agen<br>13.<br>.1 TITLE<br>.2 NAME  | nt signature require   | ADDITIONS/CHANGES TO OF  | DATE FICERS AND DIF    | RECTOR                     | RS IN 12                     |
| SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE  | PD<br>MAZOR, MIRI<br>9980 S.W. 13<br>MIAMI FL 33   | OFFICERS AN<br>AM<br>ORD STREET<br>167       | ont and title if applicable.  ND DIRECTORS  DELET                            | (NOTE: Registr<br>1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.  | ered Agen<br>13.<br>.1 TITLE<br>.2 NAME<br>.3 STREET   | nt signature require   | ADDITIONS/CHANGES TO OF  | DATE FICERS AND DIF    | RECTOF                     | RS IN 12                     |
| SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME   | PD<br>MAZOR, MIRI<br>9980 S.W. 13<br>MIAMI FL 33<br>STD<br>MAZOR, DAV                                | OFFICERS AN  AM  ORD STREET  167             | ont and title if applicable.  ND DIRECTORS  DELET                            | (NOTE: Registr  | ered Agent<br>13.<br>.1 TITLE<br>.2 NAME<br>.3 STREET<br>.4 CITY-S<br>.1 TITLE   | nt signature require   | ADDITIONS/CHANGES TO OF  | DATE FICERS AND DIF    | RECTOF                     | RS IN 12                     |
| SIGNATURE  12. TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  | PD<br>MAZOR, MIRI<br>9980 S.W. 13<br>MAMI FL 33<br>STD<br>MAZOR, DAV<br>9980 S.W. 13                 | OFFICERS AND AM STREET ID BORD STREET        | ont and title if applicable.  ND DIRECTORS  DELET                            | (NOTE: Registr<br>1<br>TE 1.<br>1.<br>1<br>TE 2<br>2      | ered Agent<br>13.<br>.1 TITLE<br>.2 NAME<br>.3 STREET<br>.4 CITY-S<br>.1 TITLE   | T ADDRESS  | ADDITIONS/CHANGES TO OF  | DATE FICERS AND DIF    | RECTOR<br>hange            | RS IN 12 Addition            |
| SIGNATURE  12. TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP   | PD<br>MAZOR, MIRI<br>9980 S.W. 13<br>MIAMI FL 33<br>STD<br>MAZOR, DAV                                | OFFICERS AND AM STREET ID BORD STREET        | ont and title if applicable.  ND DIRECTORS  DELET                            | (NOTE: Registr<br>1<br>TE 1.<br>1.<br>1<br>1<br>TE 2<br>2 | ered Agen  13. 1 TITLE 2 NAME 3 STREET 4 CITY-S 21 TITLE 22 NAME   | T ADDRESS  | ADDITIONS/CHANGES TO OF  | DATE FICERS AND DIF    | RECTOF                     | RS IN 12                     |
| SIGNATURE  12. TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  | PD<br>MAZOR, MIRI<br>9980 S.W. 13<br>MAMI FL 33<br>STD<br>MAZOR, DAV<br>9980 S.W. 13                 | OFFICERS AND AM STREET ID BORD STREET        | ont and title if applicable  ND DIRECTORS  DELET                             | (NOTE: Registr  1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.    | ered Agen  13.  1 TITLE  2 NAME  3 STREET  4 CITY-S  1 TITLE  2 NAME  23 STREE   | T ADDRESS T ADDRESS T ADDRESS T ADDRESS ST-ZIP   | ADDITIONS/CHANGES TO OF  | DATE FICERS AND DIF    | RECTOR<br>hange            | RS IN 12 Addition            |
| SIGNATURE  12. TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  TRUE  NAME  795   | PD<br>MAZOR, MIRI<br>9980 S.W. 13<br>MAMI FL 33<br>STD<br>MAZOR, DAV<br>9980 S.W. 13                 | OFFICERS AND AM STREET ID BORD STREET        | ont and title if applicable  ND DIRECTORS  DELET                             | (NOTE: Registr  1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.    | ered Agen  13. 1 TITLE 2 NAME .3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME   | T ADDRESS T ADDRESS T ADDRESS T ADDRESS ST-ZIP   | ADDITIONS/CHANGES TO OF  | DATE FICERS AND DIF    | RECTOR<br>hange            | RS IN 12 Addition            |
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| SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE | PD<br>MAZOR, MIRI<br>9980 S.W. 13<br>MIAMI FL 33<br>STD<br>MAZOR, DAV<br>9980 S.W. 13<br>MIAMI FL 33 | OFFICERS AND AM STREET ID BORD STREET        | ont and title if applicable  ND DIRECTORS  DELET  DELET  DELET  DELET  DELET | (NOTE: Registre   1                                       | ered Agent 13. 1 TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 22 NAME 23 STREE 24 CITY-S 33 STREE 33 STREE 34 CITY-S 41 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 4.3 STREE 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 5.1 TITLE 5.2 NAME 6.3 STREE 5.4 CITY-S 5.4 CITY-S 5.4 CITY-S 5.4 CITY-S 5.5 STREE 5.4 CITY-S 5.4 CITY-S 5.5 STREE 5.4 CITY-S 5.4 CITY-S 5.5 STREE 5.5 STREE 5.4 CITY-S 5.5 STREE 5.5 STREE 5.4 CITY-S 5.5 STREE 5.5 | T ADDRESS T. ZIP T ADDRESS ST. ZIP T ADDRESS ST. ZIP T ADDRESS ST. ZIP  ET ADDRESS ST. ZIP  ET ADDRESS ST. ZIP | ADDITIONS/CHANGES TO OF  | DATE FICERS AND DIF    | Change Change Change       | Addition  Addition  Addition |
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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, with all other like empowered.