

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Aug 27, 1999 8:00 am
Secretary of State

08-27-1999 90003 044 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V 40130

1. Corporation Name

PAZAV FASHIONS, Inc.

Principal Place of Business

Mailing Address

2900 W. SAMUEL RD
#5317
POMPAHO BEACH, FL 33061

4001 No. 33 Terr.
Hollywood, FL 33021

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

4. FEI Number

65-0337521

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution -

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax.

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

ALMAN, MARTIN H
17290 NE 19 AVE
NO MIAMI BEACH FL 33162

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, if applicable, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Martin H. Alman

MARTIN H. ALMAN

4/19/99

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

11.1 TITLE

11.2 NAME

11.3 STREET ADDRESS

11.4 CITY-ST-ZIP

P/O/S
PORAT, DAVID
4001 N. 33 Terr.
Hollywood, FL 33021

12.1 TITLE

12.2 NAME

12.3 STREET ADDRESS

12.4 CITY-ST-ZIP

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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY-ST-ZIP

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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

SIGNATURE:

David Porat

DAVID PORAT, AG

4/19/99