

Lazarus Corporate Filing Service Inc

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VISA OR MASTER CARD ONLY

DATE: _____

NAME OF CORPORATION: _____

CARD HOLDER NAME: _____.

CREDIT CARD ADDRESS:

PHONE NUMBER: _____

AMOUNT OF \$ _____

SIGNATURE

PRINT NAME

CHECK ONE:

COMPLETE BOOK __ SEAL ONLY__ STOCKS ONLY__ AMENDMENT__

ELECTRONIC FILING__ OTHER (SPECIFY) __

COMMENT:

Lazarus Corporate Filing Services was established in 1979. Our fully bilingual, attentive and professional staffs have served millions of satisfied customers, We'd like to take this opportunity to thank all of our customers who have helped us grow so much throughout the years.

THANK YOU.