

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 190741

FILED  
Mar 08, 2010  
Secretary of State

Entity Name: MOUW ASSOCIATES, INC.

**Current Principal Place of Business:**

409 NE 3RD STREET  
DELRAY BEACH, FL 33483 US

**New Principal Place of Business:**

**Current Mailing Address:**

409 NE 3RD STREET  
DELRAY BEACH, FL 33483 US

**New Mailing Address:**

FEI Number: 59-0761310

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

MOUW, ARMAND  
409 NE 3RD STREET  
DELRAY BEACH, FL 33483 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: ST  
Name: ARNOLD B. SMITH  
Address: 409 NE 3RD ST.  
City-St-Zip: DELRAY BEACH, FL

Title: CB  
Name: MOUW, ARMAND  
Address: 409 NE 3RD ST  
City-St-Zip: DELRAY BCH, FL 33483

Title: P  
Name: MOUW, RICHARD  
Address: 409 NE 3RD STREET  
City-St-Zip: DELRAY BEACH, FL

Title: V  
Name: SMITH, ARNOLD  
Address: 409 NE 3RD STREET  
City-St-Zip: DELRAY BEACH, FL

I hereby 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 all other like empowered.

SIGNATURE: ARMAND MOUW

CB

03/08/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date