## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000154152

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FILED Apr 16, 2007 Secretary of State

Entity Name: CONSULTING AND DESIGNS BY ARMELTA, INC.

Current P	rincipal Place	e of Business:	New Principal Place	of Business:
	ANDIS RD BEACH, FL 33	3406		
Current Mailing Address:		ss:	New Mailing Address:	
	ANDIS RD BEACH, FL 33	3406		
El Number	: 20-1990485	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:
1835 CAR	ARMELTA E ANDIS RD BEACH, FL 33	3406 US		
	named entity e of Florida.	submits this statement for the	ourpose of changing its registere	d office or registered agent, or both,
	e of Florida.	submits this statement for the	ourpose of changing its registere	d office or registered agent, or both,
n the Stat	e of Florida. Č RE:	submits this statement for the nic Signature of Registered Ag		d office or registered agent, or both,  Date
n the State	e of Florida.  RE: Electro			
n the State	e of Florida.  RE: Electro	nic Signature of Registered Ag	ent	
n the State	e of Florida.  RE: Electro  mpaign Financir  S AND DIREC	nic Signature of Registered Ag og Trust Fund Contribution ( ). CTORS: ) Delete ELTA E IS RD	ent	Date
n the State BIGNATUI Election Car DFFICER Title: Name: Address:	e of Florida.  RE: Electro  mpaign Financir  S AND DIREC  P ( BRIGGS, ARM 1835 CARAND W PALM BEAC	nic Signature of Registered Ag  ig Trust Fund Contribution ( ).  CTORS:  ) Delete  ELTA E  IS RD  CH, FL 33406  ) Delete  ID W  IS RD	ent  ADDITIONS/CHANGI  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

I hereby certify that the information supplied with this filing does not qualify for the 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: ARMELTA E BRIGGS P 04/16/2007