


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2005 08:00 AM
Secretary of State

| | | |
|---|--|---|
| DOCUMENT # P99000053636 | |  |
| 1. Entity Name ALMAR INVESTMENT PROPERTIES CORP. | | |

| | |
|--|--|
| Principal Place of Business 2700 SW 130TH AVENUE MIAMI, FL 33175 | Mailing Address 2700 SW 130TH AVENUE MIAMI, FL 33175 |
|--|--|



DO NOT WRITE IN THIS SPACE

03282005 No Chg-P CR2E034 (10/03)

| | |
|--|-------------------------------|
| 4. FEI Number 65-0962788 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

| |
|---|
| 6. Name and Address of Current Registered Agent ADAMS, FRANK T 825 41ST ST 2ND FLOOR MIAMI BEACH, FL 33140 |
|---|

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MARTINEZ, ALICIA 2700 SW 130TH AVENUE MIAMI, FL 33175 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

**DO NOT WRITE
IN THIS SPACE**

U00000335364
04/27/05-80084-009 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Alicia Martinez ALICIA P MARTINEZ 4/22/05 305-553-9873
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #