2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 254148

Title:

Name:

Address: City-St-Zip:

Entity Name: FLORIDIAN ARMS, INC.

FILED Jun 12, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1450 NE 170TH ST #326 NORTH MIAMI BEACH, FL 331629812 **New Mailing Address: Current Mailing Address:** 1430 NE 170 ST 316 #326 NORTH MIAMI BEACH, FL 331629812 FEI Number: 59-1000809 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PRESTOL, ROGELIO 1430 NE 170TH ST #326 NORTH MIAMI BEACH, FL 33162 US 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition PRESTOL, ROGELIO Name: Name: 1430 NE 170 ST #326 Address: Address: City-St-Zip: NORTH MIAMI BEACH, FL 33162 City-St-Zip: Title: Title: () Delete () Change () Addition Name: MARTINEZ, GREGORIA Name: 1450 NE 170 ST #326 Address: Address: NORTH MIAMI BEACH, FL 33162 City-St-Zip: City-St-Zip: Title: Title: () Delete (X) Change () Addition LINVAL, JUAN SMATH, TED Name: Name: 1430 NE 170 ST #326 1430 NE 170 ST #326 Address Address: City-St-Zip: NORTH MIAMI BEACH, FL 33162 City-St-Zip: NORTH MIAMI BEACH, FL 33162 Title: () Delete Title: (X) Change () Addition TORRES, YORAY SMITH, LAVERNE Name: Name: Address: 1430 NE 170ST #326 Address: 1430 NE 170ST #326 City-St-Zip: NORTH MIAMI BEACH, FL 33162 City-St-Zip: NORTH MIAMI BEACH, FL 33162

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ROGELIO PRESTOL Τ 06/12/2005

(X) Delete

NORTH MIAMI BEACH, FL 33162

JAMES, VALERIE

1430 NE 170TH ST #326

() Change () Addition