2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006247

Entity Name: ARCHIE'S COLOMBIA INC.

FILED Apr 30, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
50 SW 10 S MIAMI, FL	STREET, SUITI 33130	E 812				
Current Mailing Address:				New Mailing Address:		
50 SW 10T MIAMI, FL	H ST, STE 812 331304139	2				
FEI Number:	47-0912411	FEI Number Applied For ()	FEI Num	ber Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
DIAZ-SARMIENTO, GABRIEL S CPA 1985 NW 88TH CT, STE 201 MIAMI, FL 331722638 US				DIAZ-SARMIENTO, GABRIEL S CPA 15588 SW 62 STREET MIAMI, FL 33193 US		
The above in the State		ubmits this statement for the pu	rpose of	changing its registered	d office or registered agent, or both,	
SIGNATUR	E: DIAZ-SAR	MIENTO, GABRIEL S, CPA			04/30/2005	
	Electroni	c Signature of Registered Agen	ıt		Date	
Election Carr	paign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	, ,			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:				Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:				Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () I RESTREPO CAN 50 SW 10TH ST, MIAMI, FL 3313	MACHO DIA, NA CRITINA , STE 812		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	` '			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () I MALDONADO, IO 50 SW 10 STRE MIAMI, FL 3313	ET, SUITE 812		Title: Name: Address: City-St-Zip:	() Change () Addition	

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.

SIGNATURE: MALDONADO, IGNACIO S 04/30/2005