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Jan 15 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **M46587** (5)
1. Corporation Name:
ARMAND PROPERTIES, INC.



Principal Place of Business: **10691 N. KENDALL DRIVE SUITE PH306 MIAMI FL 33176 US**
Mailing Address: **10691 N. KENDALL DRIVE SUITE PH306 MIAMI FL 33176-1551 US**

3. Date Incorporated or Qualified: **02/13/1987** 3a. Date of Last Report: **01/29/1996**
4. FEI Number: **59-2766259** Applied For: Not Applicable
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ARMAND PROPERTIES (TERESA ARMAND)
11010 N KENDALL DR., SUITE 216
MIAMI FL 33176**

81 Name: **TERESA ARMAND**
82 Street Address (P.O. Box Number is Not Acceptable): **10691 N. Kendall Dr.**
83: **Ste 306**
84 City: **MIAMI** 85 Zip Code: **FL 33176**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with 4 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Includes entry for ARMAND, TERESA at 8005 SW 107TH AVE. #315 MIAMI FL.

Table with 4 columns: 1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY-ST-ZIP. Includes handwritten entries and stamps: 300002060003, 500002060415.

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: _____ DATE: 1/16/97 TIME: 274-9944

CR2E034 (9/96)