

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 18, 2005 8:00 am**  
**Secretary of State**

04-18-2005 90567 006 \*\*\*150.00

20036445



<b>DOCUMENT # M89520</b> 1. Entity Name <b>ARMEN REALTY, INC.</b>																													
Principal Place of Business <b>931 NE 48TH ST</b> <b>OAKLAND PK, FL 33334 US</b>			Mailing Address <b>931 NE 48TH ST</b> <b>OAKLAND PK, FL 33334 US</b>																										
2. Principal Place of Business		3. Mailing Address																											
Suite, Apt. #, etc.		Suite, Apt. #, etc.																											
City & State		City & State																											
Zip	Country	Zip	Country	4. FEI Number <b>65-0056794</b>																									
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable																									
6. Name and Address of Current Registered Agent  <b>ADJEHIAN, GAREN</b> <b>931 NE 48TH ST</b> <b>OAKLAND PK, FL 33334</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>																									
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																													
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees																											
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <b>10. OFFICERS AND DIRECTORS</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 65%; padding: 2px;">PD</td> <td style="width: 20%; text-align: right; padding: 2px;"><input type="checkbox"/> Delete</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;">ADJEHIAN, GAREN</td> <td></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;">3015 N. OCEAN #12 I</td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;">FORT LAUDERDALE, FL 33308</td> <td></td> </tr> </table> </div> <div style="width: 48%;"> <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 65%; padding: 2px;">ADJEHIAN</td> <td style="width: 20%; text-align: right; padding: 2px;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;">#12 - I</td> <td></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	PD	<input type="checkbox"/> Delete	NAME	ADJEHIAN, GAREN		STREET ADDRESS	3015 N. OCEAN #12 I		CITY-ST-ZIP	FORT LAUDERDALE, FL 33308		TITLE	ADJEHIAN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	#12 - I		STREET ADDRESS			CITY-ST-ZIP		
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**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #