

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000014047

Entity Name: ARMADI'S VIDEO, INC.

FILED
Apr 04, 2005
Secretary of State

Current Principal Place of Business:

3520 S.W. 8TH STREET
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

P O BOX 441702
MIAMI, FL 33144

New Mailing Address:

FEI Number: 65-0980926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VALDES, ARMADIS
4841 SW 5 TR
MIAMI, FL 33134 US

Name and Address of New Registered Agent:

VALDES, ARMADIS
P.O.BOX 441702
MIAMI, FL 33144 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: ARMADIS VALDES

04/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: VALDES, ARMADIS
Address: 2951 SW 39 AVE
City-St-Zip: MIAMI, FL 33134

Title: ADM () Delete
Name: FALCON, IVAN
Address: 3631 SW 5TH TERRACE
City-St-Zip: MIAMI, FL 33135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: VALDES, ARMADIS
Address: P.O.BOX441702
City-St-Zip: MIAMI, FL 33144

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ARMADIS VALDES

PSTD

04/04/2005

Electronic Signature of Signing Officer or Director

Date