

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000086776

FILED  
Aug 25, 2004  
Secretary of State

Entity Name: ARMSWARE, INC.

**Current Principal Place of Business:**

2937 SW 27 AVE.  
SUITE 101  
MIAMI, FL 33133

**New Principal Place of Business:**

2600 SW 3RD AVENUE  
5TH FLOOR  
MIAMI, FL 33129 US

**Current Mailing Address:**

2937 SW 27 AVE.  
SUITE 101  
MIAMI, FL 33133

**New Mailing Address:**

2600 SW 3RD AVENUE  
5TH FLOOR  
MIAMI, FL 33129 US

FEI Number: 65-1038260

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LANGE, KARL C  
2937 SW 27 AVE.  
SUITE 101  
MIAMI, FL 33133 US

**Name and Address of New Registered Agent:**

LANGE, KARL C  
2600 SW 3RD AVENUE  
5TH FLOOR  
MIAMI, FL 33129 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: KARL C LANGE

08/25/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: LANGE, KARL C  
Address: 2937 SW 27 AVE., SUITE 101  
City-St-Zip: MIAMI, FL 33133

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: KARL C LANGE

D

08/25/2004

Electronic Signature of Signing Officer or Director

Date