## 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P01000065420

Entity Name: ALLIED MARITIME INVESTMENTS CORP.

FILED Dec 24, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1717 N BAYSHORE DR 3795 NW S. RIVER DRIVE

**SUITE 1035** MIAMI, FL 33142 MIAMI, FL 33132

**Current Mailing Address: New Mailing Address:** 

1717 N BAYSHORE DR 3795 NW S. RIVER DRIVE

**SUITE 1035** MIAMI, FL 33142 MIAMI, FL 33132

FEI Number: 80-0033094 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ZAMBRANNA, JAY J MENDOZA, WILSON 3795 NW S. RIVER DRIVE 1717 N BAYSHORE DR **SUITE 1035** MIAMI, FL 33142 MIAMI, FL 33132 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: WILSON MENDOZA 12/24/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition () Delete Title:

LOUIS, JOHN C LOUIS, JOHN C Name: Name: 1717 N BAYSHORE DR, STE 1035 Address: 3795 NW S. RIVER DRIVE Address:

City-St-Zip: MIAMI, FL 33132 City-St-Zip: MIAMI, FL 33142

Title: () Delete Title: (X) Change ( ) Addition

ZAMBRANNA, JAY J MENDOZA, WILSON Name: Name: 1717 N BAYSHORE DR, STE 1035 Address: 3795 NW S. RIVER DRIVE Address: MIAMI, FL 33132 MIAMI, FL 33142 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JOHN C. LOUIS PD 12/24/2008