

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000009012

FILED
Jan 04, 2008
Secretary of State

Entity Name: ARCHIE'S AWARDS BY CONNIE. INC

Current Principal Place of Business:

688 NE 125TH ST
NORTH MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

688 NE 125TH ST
NORTH MIAMI, FL 33161

New Mailing Address:

FEI Number: 16-1652262

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALTES, ACELIA A
465 NE 109TH ST
MIAMI, FL 33161 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GOODING, CARMEN M
Address: 465 NE 109TH ST
City-St-Zip: MIAMI, FL 33161 US

Title: P () Delete
Name: RASCHE, SHANE
Address: 527 NE 132ND TERR
City-St-Zip: MIAMI, FL 33161 US

Title: VP () Delete
Name: GALTES, ACELIA A
Address: 465 NE 109TH ST
City-St-Zip: MIAMI, FL 33161 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VALLE, JOHNNY
Address: 64 MEISEL AVE
City-St-Zip: SPRINGFIELD, NJ 07081 US

Title: VP (X) Change () Addition
Name: GALTES, ACELIA A
Address: 530 NE 91TH ST
City-St-Zip: MIAMI SHORES, FL 33138 US

Title: D (X) Change () Addition
Name: GOODING, CARMEN M
Address: 530 NE 91TH ST
City-St-Zip: MIAMI SHORES, FL 33138 US

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: ACELIA GALTES

VP

01/04/2008

Electronic Signature of Signing Officer or Director

Date