2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000115272

Entity Name: ARGENTAMY CORP.

FILED Aug 05, 2008 Secretary of State

Current Princi	pal Place of Business:	New Principal Place of Business

2935 NE 163 ST 7910 NW 25 STREET #6-A 210

MIAMI BEACH, FL 33160 DORAL, FL 3122

Current Mailing Address: New Mailing Address:

2935 NE 163 ST 7910 NW 25 STREET #6-A 210
MIAMI BEACH, FL 33160 DORAL, FL 3122

FEI Number: 77-0611423 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:

MARTINEZ, NOEMI ISABEL AVILA, NESTOR 6937 BAY DRIVE APT # 204 APT # 204

MIAMI BEACH, FL 33141 US MIAMI BEACH, FL 33141 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: NESTOR AVILA 08/05/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 MARTINEZ, NOEMI ISABEL
 Name:

 Address:
 1026 SW 9 STREET
 Address:

 City-St-Zip:
 MIAMI, FL 33130
 City-St-Zip:

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

Name: AYILA, HESTOR E Name: AVILA, NESTOR E

 Address:
 6937 BAY DRIVE APT # 204
 Address:
 6937 BAY DRIVE APT # 204

 City-St-Zip:
 MIAMI BEACH, FL 33141
 City-St-Zip:
 MIAMI BEACH, FL 33141

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: NESTOR AVILA PD 08/05/2008