

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000141800

Entity Name: ARMANDO GUTIERREZ, INC.

FILED  
Feb 03, 2006  
Secretary of State

## Current Principal Place of Business:

1619 HASTINGS DR.  
DELTONA, FL 32725

## New Principal Place of Business:

1639 W. WAYCROSS CIR  
DELTONA, FL 32725 US

## Current Mailing Address:

1619 HASTINGS DR.  
DELTONA, FL 32725

## New Mailing Address:

1639 W. WAYCROSS CIR  
DELTONA, FL 32725 US

FEI Number: 56-2416048

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HERNANDEZ, LUZ E  
1037 E. HANCOCK DR  
DELTONA, FL 32725 US

## Name and Address of New Registered Agent:

GUTIERREZ, ARMANDO  
1639 W. WAYCROSS CIR  
DELTONA, FL 32725 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: ARMANDO GUTIERREZ

02/03/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GUTIERREZ, ARMANDO  
Address: 1619 HASTINGS DR.  
City-St-Zip: DELTONA, FL 32725

Title: S (X) Delete  
Name: GUTIERREZ, JAVIER  
Address: 1900 W. FINLAND DR.  
City-St-Zip: DELTONA, FL 32725

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: GUTIERREZ, ARMANDO  
Address: 1639 W. WAYCROSS CIR  
City-St-Zip: DELTONA, FL 32725 US

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 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: ARMANDO GUTIERREZ

PD

02/03/2006

Electronic Signature of Signing Officer or Director

Date