

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000013619

FILED
Feb 08, 2007
Secretary of State

Entity Name: ALMANZAR FINANCIAL SERVICES, CORP.

Current Principal Place of Business:

2252 WEST 74 TERRA
HIALEAH, FL 33016

New Principal Place of Business:

7295 NW 173 DRIVE
UNIT #101
MIAMI, FL 33015

Current Mailing Address:

2252 WEST 74 TERRA
HIALEAH, FL 33016

New Mailing Address:

7295 NW 173 DRIVE
UNIT #101
MIAMI, FL 33015

FEI Number: 20-0627637

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALMANZAR, ALICIA
2252 WEST 74 TERRA
HIALEAH, FL 33016 US

Name and Address of New Registered Agent:

ALMANZAR, ELEUTERIO
7295 NW 173 DRIVE
UNIT #101
MIAMI, FL 33015 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: ELEUTERIO ALMANZAR

02/08/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ALMANZAR, ALICIA
Address: 2252 WEST 74 TERRA
City-St-Zip: HIALEAH, FL 33016

Title: VD () Delete
Name: ALMANZAR, ELEUTERIO
Address: 2252 WEST 74 TERRA
City-St-Zip: HIALEAH, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALMANZAR, ALICIA
Address: 7295 NW 173 DRIVE UNIT #101
City-St-Zip: MIAMI, FL 33015

Title: VD (X) Change () Addition
Name: ALMANZAR, ELEUTERIO
Address: 7295 NW 173 DRIVE UNIT #101
City-St-Zip: MIAMI, FL 33015

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: ALICIA ALMANZAR

PD

02/08/2007

Electronic Signature of Signing Officer or Director

Date