2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2009
Secretary of State

DOCUMENT# P04000032490

Entity Name: ALMAR REALTY ASSOCIATES CORP.

Current Principal Place of Business:

19089 W. DIXIE HWY
NORTH MIAMI BCH, FL 33180

New Principal Place of Business:

Current Mailing Address:

19089 W. DIXIE HWY
SUITE D
NORTH MIAMI BCH, FL 33180

New Mailing Address:

FEI Number: 73-1695547 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LANE, PAUL J
2755 E. OAKLAND PARK BLVD.
SUITE 300
FT. LAUDERDALE, FL 33306 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: PD ( ) Delete
Name: VARRICHIONE, MARIA
Address: 670 WILHELM PLACE
City-St-Zip: CONCORD, NC 28025

Title: VD ( ) Delete
Name: VARRICHIONE, ANDY
Address: 670 WILHELM PLACE
City-St-Zip: CONCORD, NC 28025

Title: D ( ) Delete
Name: SHIDLOWSKY, HOWARD
Address: 19089 W. DIXIE HWY
City-St-Zip: NORTH MIAMI BCH, FL 33180

Title: SD ( ) Delete
Name: BOUET, ALBINA
Address: 19089 W.DIXIE HWY
City-St-Zip: NORTH MIAMI BCH, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: HOWARD SHIDLOWSKY DIR 04/09/2009

Electronic Signature of Signing Officer or Director — Date