

# **2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P05000053375

**FILED**  
**Apr 04, 2008**  
**Secretary of State**

**Entity Name:** AAA AMERICAN REALTY CORP.

**Current Principal Place of Business:**

200 S. ANDREWS AVENUE  
8TH FLOOR  
FORT LAUDERDALE, FL 33301

**New Principal Place of Business:**

**Current Mailing Address:**

500 N. FEDERAL HIGHWAY  
HALLANDALE BEACH, FL 33009

**New Mailing Address:**

500 N FEDERAL HIGHWAY  
HALLANDALE BEACH, FL 33009

**FEI Number:** 81-0668582

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

AZADI, DORA M  
500 N FEDERAL HWY  
HALLANDALE BEACH, FL 33009 US

**Name and Address of New Registered Agent:**

AZADI, DORA M  
500 N FEDERAL HIGHWAY  
HALLANDALE BEACH, FL 33009 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/04/2008

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: AZADI, ARMAN  
Address: 500 N FEDERAL HWY  
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: DVP ( ) Delete  
Name: AZADI, DORA M  
Address: 500 N FEDERAL HWY  
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: DSEC ( ) Delete  
Name: AZADI, DORA  
Address: 500 N. FEDERAL HIGHWAY  
City-St-Zip: HALLANDALE BEACH, FL 33009

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: DSEC (X) Change ( ) Addition  
Name: AZADI, DORA M  
Address: 500 N FEDERAL HWY  
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: DVP (X) Change ( ) Addition  
Name: NAVARRETE, GUILLERMO  
Address: 1250 E HALLANDALE BEACH BLVD, #407  
City-St-Zip: HALLANDALE BEACH, FL 33009

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: DORA AZADI

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

DVP

04/04/2008

\_\_\_\_\_  
Date