

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000117663

FILED
Apr 30, 2008
Secretary of State

Entity Name: ARMADA FUNDING INTERNATIONAL, CORP.

Current Principal Place of Business:

3399 NW 72 ST.
STE. 210
MIAMI, FL 33122

New Principal Place of Business:

3399 NW 72 AVE.
STE. 210
MIAMI, FL 33122

Current Mailing Address:

3399 NW 72 ST.
STE. 210
MIAMI, FL 33122

New Mailing Address:

3399 NW 72 AVE.
STE. 210
MIAMI, FL 33122

FEI Number: 20-5559319

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAZQUEZ, JOSE
7855 NW 12 STREET
STE. 210
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

VAZQUEZ, JOSE
3399 NW 72 AVE.
STE. 210
MIAMI, FL 33122 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:

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ALBA REILLY, KEYLA
Address: 3399 NW 12 ST. #210
City-St-Zip: MIAMI, FL 33122

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ALBA REILLY, KEYLA
Address: 3399 NW 72 AVE. #210
City-St-Zip: MIAMI, FL 33122

Title: D () Change (X) Addition
Name: VAZQUEZ, JOSE
Address: 3399 NW 72 AVE. #210
City-St-Zip: MIAMI, FL 33122

Title: D () Change (X) Addition
Name: VAZQUEZ, JORGE
Address: 3399 NW 72 AVE. #210
City-St-Zip: MIAMI, FL 33122

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: KEYLA ALBA REILLY

D

04/30/2008

Electronic Signature of Signing Officer or Director

Date