## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P06000124859

1. Entity Name
ARGENDUCT, INC.



Principal Place of Business

7946 EAST DRIVE APT # 308 NORTH BAY VILLAGE, FL 33141

SIGNATURE:

Mailing Address

7946 EAST DRIVE APT # 308

NORTH BAY VILLAGE, FL 33141

## FILED Mar 06, 2008 8:00 am Secretary of State

03-06-2008 90044 004 \*\*\*150.00

(305)423-5694

Daytime Phone #

2/26/08



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* *					5. Certificate of	Status Desired	□ \$8 Fe	3.75 Additional e Required	
~	- 6. Name and A	ddress of Current Reg	istered Agent				<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	<del></del>	
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the obligat	named entity submittions of registered ag	its this statement for the gent.	purpose of changing its regist	ered office or registe	ered agent, or both,	in the State of Flor	ida. Lam tan	illiar with, and accept	
SIGNATURE.		1. A. 1. A.				•	4.4		
	Signature, typed or printed	name of registered agent and to	le d applicable. (NOTE: Regist	ered Agent signature require	ed when reinstating)		DATE '		
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FIL After M	E NOW!!! FEE ay 1, 2008 Fee	IS \$150.00 will be \$550.00	Selection Campaign Fir Trust Fund Contribution	nancing \$5 n.	5.00 May Be ided to Fees	٠	A 1 1	<b>.</b>	
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR FRESIDENT

EDUARDO DUBS