

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000041035

Entity Name: ARGEN, CORP.

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

113 SW 1ST STREET  
HALLANDALE, FL 33009

## New Principal Place of Business:

113 SW 2ND STREET  
HALLANDALE, FL 33009

## Current Mailing Address:

113 SW 2ST STREET  
HALLANDALE, FL 33009

## New Mailing Address:

113 SW 2ND STREET  
HALLANDALE, FL 33009

FEI Number: 20-8788688

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

JOSEPH K. NOFIL, P.A.  
3284 NORTH STATE ROAD 7  
LAUDERDALE LAKES, FL 33319 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: P ( ) Delete  
Name: CEJAS, GASTON  
Address: 113 SW 1ST STREET  
City-St-Zip: HALLANDALE, FL 33009

Title: V ( ) Delete  
Name: DOMINGUEZ, HORACIO  
Address: 113 SW 1ST STREET  
City-St-Zip: HALLANDALE, FL 33009

Title: T ( ) Delete  
Name: CEJAS, GLORIA  
Address: 113 SW 1ST STREET  
City-St-Zip: HALLANDALE, FL 33009

## 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:

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: GASTON CEJAS

PRES

04/30/2009

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

\_\_\_\_\_  
Date