

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

DOCUMENT# P07000097315

**FILED**  
**Apr 25, 2008**  
**Secretary of State**

**Entity Name:** AFFORDABLE PROPERTY MANAGEMENT SERVICES INC.

**Current Principal Place of Business:**

16927 SW 141 AVE.  
MIAMI, FL 33177

**New Principal Place of Business:**

6969 COLLINS AVENUE  
315  
MIAMI BEACH, FL 33141

**Current Mailing Address:**

16927 SW 141 AVE.  
MIAMI, FL 33177

**New Mailing Address:**

P.O.BOX 771838  
MIAMI, FL 33177

**FEI Number:** 13-4367042

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VARGAS, GERMAN  
16927 SW 141 AVE.  
MIAMI, FL 33177 US

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

VARGAS, GERMAN  
P.O BOX 771838  
MIAMI, FL 33177 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

04/25/2008

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ROMAN, BOBBY  
Address: 16927 SW 141 AVE.  
City-St-Zip: MIAMI, FL 33177

Title: V ( ) Delete  
Name: DIAZ, AMALAY  
Address: 16927 SW 141 AVE.  
City-St-Zip: MIAMI, FL 33177

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

Title: P (X) Change ( ) Addition  
Name: ROMAN, BOBBY  
Address: 6969 COLLINS AVENUE #315  
City-St-Zip: MIAMI BEACH, FL 33141

Title: V (X) Change ( ) Addition  
Name: ROMAN, BOBBY  
Address: 6969 COLLINS AVENUE #315  
City-St-Zip: MIAMI, FL 33141

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: BOBBY ROMAN

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

P

04/25/2008

\_\_\_\_\_  
Date