2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2009
Secretary of State

DOCUMENT# P07000097927

Entity Name: ARMAS SYSTEMS OF FLORIDA CORP.

Current Principal Place of Business:

9002 S. W. 8TH TERRACE
MIAMI, FL 33174 US

New Principal Place of Business:

995 SW 84 AVE
UNIT 428
MIAMI, FL 33144 US

Current Mailing Address:

9002 S. W. 8TH TERRACE
MIAMI, FL 33174 US

New Mailing Address:

995 SW 84 AVE
UNIT 428
MIAMI, FL 33144 US

FEI Number: 26-0843851 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RIVAS, JORGE F
6935 S.W. 154 COURT
MIAMI, FL 33193 US

Name and Address of New Registered Agent:

ARMAS, OSVALDO D
995 SW 84 AVE
UNIT 428
MIAMI, FL 33144 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: OSVALDO D ARMAS 04/24/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete
Name: ARMAS, OSVALDO D
Address: 9002 S. W. 8TH TERRACE
City-St-Zip: MIAMI, FL 33174 US

Title: VP/D (X) Delete
Name: RIVAS, JORGE F
Address: 6935 S. W. 154 COURT
City-St-Zip: MIAMI, FL 33193 US

Title: T/S (X) Delete
Name: ARMAS, OSVALDO D
Address: 9002 S. W. 8TH TERRACE
City-St-Zip: MIAMI, FL 33174 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ARMAS, OSVALDO D
Address: 995 SW 84 AVE UNIT 428
City-St-Zip: MIAMI, FL 33144 US

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: OSVALDO D ARMAS PD 04/24/2009
Electronic Signature of Signing Officer or Director Date