


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 05, 2005 8:00 am**  
**Secretary of State**

03-14-2005 90120 013 \*\*\*150.00

<b>DOCUMENT # P92000008287</b>	
1. Entity Name <b>ARMADA APPRAISAL COMPANY</b>	

Principal Place of Business <b>7171 CORAL WAY STE 404 MIAMI, FL 33155</b>	Mailing Address <b>7400 SW 75 TERRACE MIAMI, FL 33143</b>
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



06302005 Chg-P CR2E034 (10/03)

4. FEI Number <b>65-0383554</b>		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>ARMADA, JORGE 4011 W FLAGLER STE STE 501 MIAMI, FL 33134-1638</b>		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL	Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and (if applicable, (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00  
Due by September 7, 2005**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVPS ARMADA, ALBERT J 7400 SW 75TH TERRACE MIAMI, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 to use the 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.


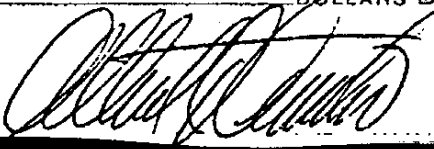
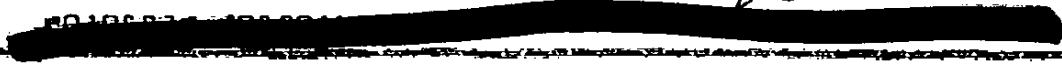
SIGNATURE:  **ALBERT J. ARMADA** Date: **6/30/05** Daytime Phone #: **305 2663920**

Bk928-FLSavinBk

ATTACHMENT 66024196

3/21/05 DIN: 1-1-1180 Account:10058873 Amount: 150.00 Check #:10683

# P92000008287

<b>ARMADA APPRAISAL COMPANY</b> 7171 CORAL WAY, SUITE 404 MIAMI, FL 33155		10683
DATE <u>3/10/05</u>		50026538
PAY TO THE ORDER OF <u>Florida Department of State</u>		\$ <u>150.00</u>
<u>One hundred fifty &amp; 00/100</u>		DOLLARS
 <b>FLORIDA SAVINGS BANK</b> 7171 Coral Way Miami, FL 33155		
FOR <u>Doc # P92000008287</u>		
		

<b>DEPARTMENT OF STATE</b> FOR DEPOSIT ONLY ACCT. # 1008088783		<b>MAR 14 2005</b>
2200 502653		
<b>BANK OF AMERICA NA</b> 6340614757		