

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P97000018854

FILED
Oct 09, 2009
Secretary of State**Entity Name:** ALTIMA DEVELOPMENT, CORP.**Current Principal Place of Business:**8815 CONROY WINDERMERE RD.
130
ORLANDO, FL 32835 US**New Principal Place of Business:****Current Mailing Address:**8815 CONROY WINDERMERE RD.
130
ORLANDO, FL 32835 US**New Mailing Address:****FEI Number:** 59-3429588**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**BROOKS, ESTELL
12253 PARK AVENUE
ORLANDO, FL 34786 US**Name and Address of New Registered Agent:**BROOKS, ESTELLE
12253 PARK AVENUE
ORLANDO, FL 34786 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: ESTELLE BROOKS

10/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: AZZOUZ, KEVIN H
Address: 8815 CONROY WINDERMERE RD, STE 130
City-St-Zip: ORLANDO, FL 32835

Title: DV (X) Delete
Name: AZZOUZ, SABRINA M
Address: 8815 CONROY WINDERMERE RD. STE 130
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: KEVIN H AZZOUZ

DPST

10/09/2009

Electronic Signature of Signing Officer or Director

Date