

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000039668

FILED
Feb 16, 2005
Secretary of State

Entity Name: BALFOORT FINNVOLD ARCHITECTURE, INC.

Current Principal Place of Business:

1948 E SUNRISE BLVD SUITE 2
FORT LAUDERDALE, FL 33304 US

New Principal Place of Business:

Current Mailing Address:

1948 E SUNRISE BLVD SUITE 2
FORT LAUDERDALE, FL 33304 US

New Mailing Address:

FEI Number: 65-0917183

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALFOORT, MICHELLE G PRES
211 SW 2ND STREET
SUITE E
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

BALFOORT, MICHELLE G PRES
1504 SW 5 CT
FORT LAUDERDALE, FL 33312 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: MICHELLE G. BALFOORT

02/16/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: BALFOORT, MICHELLE G
Address: 211 SW 2ND ST, SUITE E
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BALFOORT, MICHELLE G
Address: 1504 SW 5 CT
City-St-Zip: FORT LAUDERDALE, FL 33312

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MICHELLE G. BALFOORT

PRES

02/16/2005

Electronic Signature of Signing Officer or Director

Date