## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # P99000082300

1. Entity Name
ARCHIVE AMERICA OF DETROIT, INC.



Principal Place of Business

3455 NW 54 STREET, MIAMI, FL 33142

Mailing Address

3455 NW 54 STREET MIAMI, FL 33142

## FILED Apr 06, 2005 8:00 am Secretary of State

04-06-2005 90110 046 \*\*\*150.00



02152005 No Chg-P CR2E

CR2E034 (10/03)

4. FEI Number Applied For 65-0959065 Not Applied be

5. Codificate of Status Posical Status Posi

5. Certificate of Status Desired

Fee Required

6.	Name and	Address of	Current	Registered	Agent

CORPDIRECT AGENTS, INC. 103 N. MERIDIAN STREET TALLAHASSEE, FL 32301

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TALLAHASSEE, FL 32301			IN THIS SPACE					
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 title	if applicable. (NOTE: Registered A	gent signatur	e required when reinstating)	DATE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	Election Campaign Financi     Trust Fund Contribution.	ing 🔲	\$5.00 May Be Added to Fees					
10. OFFICERS AND DIREC	CTORS							
TITLE D BLANK, ANDREW STREET ADDRESS 3455 NW 54 STREET CITY-ST-ZIP MIAMI, FL 33142 TITLE S/T								
NAME - ROBERT FISCHER		·						
STREET ADDRESS 3455 NW 54th STREET								
CITY-ST-ZIP MIAMI FL. 33142	Robert-Fischer Street 3455 NW 54th Street MAMI, FL. 33142							
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO N	OT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE						
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP				•				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			d - 0					

2. 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 trustee 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

SEC/TREA

3:30:05

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