

USCIS
Attn: Change of Address
344 Pleasants Drive
Harrisonburg, VA 22801

RE: AR-11 Alien's Change of Address Card
Applicant: Andreza Cabral Tavares Almeida
Beneficiary: Ian Marques Almeida

Dear Sir or Madam,

Please find enclosed a completed Form AR-11, Aliens Change of Address Card for the applicant and her beneficiary.

Sincerely,



Date: 03/13/2026

Otavio Haverroth Silva, SBN#343486
P.O. Box 90487
San Diego, CA 92169
(510) 241-9336



Alien's Change of Address Card

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form AR-11

NOTE: An asterisk (*) indicates a mandatory field that must be completed.

Information About You

*Family Name (Last Name) CABRAL TAVEIRA ALMEIDA	*Given Name (First Name) ANDREZA	Middle Name (if applicable) NA
*Date of Birth (mm/dd/yyyy) 06/29/1997	Alien Registration Number (A-Number) (if any) ▶ A- 2 4 2 3 2 5 6 6 8	

Information About Your Address

*Present Physical Address (No PO Boxes)

*Street Number and Name 2417 Serenity Way NW	Apt. <input type="checkbox"/> Ste. <input type="checkbox"/> Flr. <input type="checkbox"/>	Number N/A
*City or Town Acworth	*State GA	*ZIP Code 30101

Previous Physical Address

Street Number and Name 205 Old County Rd 317	Apt. <input type="checkbox"/> Ste. <input type="checkbox"/> Flr. <input type="checkbox"/>	Number N/A
City or Town Belmont	State CA	ZIP Code 94002

Mailing Address (optional)

Street Number and Name PO BOX 90487	Apt. <input type="checkbox"/> Ste. <input type="checkbox"/> Flr. <input type="checkbox"/>	Number N/A
City or Town San Diego	State CA	ZIP Code 92169

Your Signature

*Your Signature <i>Andreza Cabral Taveira Almeida</i>	Date of Signature (mm/dd/yyyy) 03/13/2026
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Address Change Information and Instructions

All aliens subject to registration requirements may use this form to report a change of address within 10 days of such change. For detailed instructions on how to update your address, please visit www.uscis.gov/addresschange. The collection of this information is required by Immigration and Nationality Act (INA) section 265 (8 U.S.C. 1305). U.S. Citizenship and Immigration Services (USCIS) uses the data collected on this form for statistical and record-keeping purposes, and may share this information with other Federal, state, local, and law enforcement officials. Failure to report a change of address is punishable by fine or imprisonment and/or removal from the United States.

NOTE: This form is not evidence of identity, age, or status claimed.

IMPORTANT: If you are in immigration proceedings, you must separately notify the Immigration Court of any address changes. Filing Form AR-11 with USCIS does not update your address with the Immigration Court.

Instructions

Complete all fields on this form, sign and date the form, and mail it to:

U.S. Department of Homeland Security
Citizenship and Immigration Services
Attn: Change of Address
1344 Pleasants Drive
Harrisonburg, VA 22801

DHS Privacy Notice

AUTHORITIES: The information requested on this form is collected under the Immigration and Nationality Act (INA) section 265.

PURPOSE: The primary purpose for providing the requested information on this form is to report a change of address. Except for those exempted, all aliens in the U.S. are required to report any change of address or new address. DHS uses the information you provide to contact you about the immigration benefit you are seeking.

DISCLOSURE: The information you provide is mandatory. Failure to report a change of address may result in a fine, imprisonment and/or removal (8 U.S.C. sections 1227(a)(3) and 1306). Failure to comply could also jeopardize your ability to obtain a future visa or other immigration benefits.

ROUTINE USES: DHS may share the information you provide on this form with other Federal, state, local, and foreign government agencies and authorized organizations. DHS follows approved routine uses described in the associated published system of records notices [DHS/USCIS-001 - Alien File, Index, and National File Tracking System and DHS/USCIS-007 - Benefits Information System] and the published privacy impact assessments [DHS/USCIS/PIA-018 Alien Change of Address Card (AR-11)] which you can find at www.dhs.gov/privacy. DHS may also share this information, as appropriate, for law enforcement purposes or in the interest of national security.



Alien's Change of Address Card

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form AR-11

NOTE: An asterisk (*) indicates a mandatory field that must be completed.

Information About You

*Family Name (Last Name)

MARQUES ALMEIDA

*Given Name (First Name)

IAN

Middle Name (if applicable)

NA

*Date of Birth (mm/dd/yyyy)

02/10/1995

Alien Registration Number (A-Number) (if any)

▶ A- 2 4 2 3 2 5 6 6 9

Information About Your Address

*Present Physical Address (No PO Boxes)

*Street Number and Name

2417 Serenity Way NW

Apt. Ste. Flr. Number

N/A

*City or Town

Acworth

*State

GA

*ZIP Code

30101

Previous Physical Address

Street Number and Name

205 Old County Rd 317

Apt. Ste. Flr. Number

N/A

City or Town

Belmont

State

CA

ZIP Code

94002

Mailing Address (optional)

Street Number and Name

PO BOX 90487

Apt. Ste. Flr. Number

N/A

City or Town

San Diego

State

CA

ZIP Code

92169

Your Signature

*Your Signature

Date of Signature (mm/dd/yyyy)

03/13/2026

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