


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED  
Mar 18, 2004 08:00 AM  
Secretary of State**

DOCUMENT # H92163		
1. Entity Name AREX FINANCIAL CORP.		
Principal Place of Business 1111 BRICKELL AVE. 11TH FLOOR MIAMI, FL 33131	Mailing Address PO BOX 491230 KEY BISCAYNE, FL 33149	
<b>DO NOT WRITE IN THIS SPACE</b>		



03042004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0034610	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

RUIZ, JOSE' A.  
181 BRICKELL AVE. 11TH FLOOR  
MIAMI, FL 33131

**DO NOT WRITE  
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	U00000092082 03/18/04-80034-022 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD HERRERA, JOSE M. 1111 BRICKELL AVE. 11TH FLOOR MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS RUIZ, JOSE A. 1111 BRICKELL AVE. 11TH FLOOR MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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IN THIS SPACE**

**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 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: Jose A. Ruiz, VS Date: 3-10-04 Daytime Phone #: 305-2745333