2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000144751

Entity Name: ARIEL AGUILAR ENTERPRISES INC

FILED May 08, 2009 Secretary of State

	Principal Place of Business:	New Principal Place of Business:
	AL WOOD CT. EE, FL 34743	
Current N	Mailing Address:	New Mailing Address:
	AL WOOD CT. EE, FL 34743	
FEI Numbe	r: 20-5913143 FEI Number Appli	ed For () FEI Number Not Applicable () Certificate of Status Desired ()
Name and	d Address of Current Registere	d Agent: Name and Address of New Registered Agent:
	, ARIEL AL WOOD CT. EE, FL 34743 US	
	e named entity submits this stater e of Florida.	nent for the purpose of changing its registered office or registered agent, or both,
SIGNATU	RE:	
SIGNATU	RE: Electronic Signature of Re	egistered Agent Date
In accordar Election Ca	Electronic Signature of Rence with s. 607.193(2)(b), F.S., the corporation of Financing Trust Fund Contrib	poration did not receive the prior notice. ution ().
In accordar Election Ca	Electronic Signature of Rence with s. 607.193(2)(b), F.S., the corp	poration did not receive the prior notice.
In accordar Election Ca	Electronic Signature of Rence with s. 607.193(2)(b), F.S., the corporation of Financing Trust Fund Contrib	poration did not receive the prior notice. ution ().
In accordar Election Ca OFFICER Title: Name: Address:	Electronic Signature of Rence with s. 607.193(2)(b), F.S., the corporation of Figure 1. Electronic Signature of Rence with s. 607.193(2)(b), F.S., the corporation of F.S. and Contributed Signature 1. Electronic Signature of Rence with the second signature of Re	oration did not receive the prior notice. ution (). ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Title: () Change () Addition Name: Address:

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: ARIEL AGUILAR OWNE 05/08/2009