

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000001721

Entity Name: ARBOR HOLDINGS CORP.

FILED
May 01, 2007
Secretary of State

Current Principal Place of Business:

4833 COLLINS AVENUE
C/O OBR SUITE 1714
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

Current Mailing Address:

4833 COLLINS AVENUE
C/O OBR SUITE 1714
MIAMI BEACH, FL 33140 US

New Mailing Address:

PO BOX 140668
CORAL GABLES, FL 33114 US

FEI Number: 13-3547663

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

M.J.F. REGISTERED AGENT CORP
153 SEVILLA AVE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MURRAY, JACQUES G
Address: 22 RUE DE L'ATHENEE
City-St-Zip: 1206 GENEVA, CH

Title: DS () Delete
Name: PILLOIS, JEAN C
Address: 4833 COLLINS AVENUE, SUITE 1714
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: DVP () Delete
Name: SEBAG, EMMANUEL
Address: 4833 COLLINS AVENUE, SUITE 1714
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: DT () Delete
Name: POLLARD, RICHARD J
Address: 4833 COLLINS AVENUE, SUITE 1714
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: DVP () Delete
Name: SIMMONDS, JOEL L
Address: 4833 COLLINS AVENUE, SUITE 1714
City-St-Zip: MIAMI BEACH, FL 33140 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JACQUES G MURRAY

DP

05/01/2007

Electronic Signature of Signing Officer or Director

_____ Date