

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000001969

**Entity Name:** ARLES SERVICES, INC.

**Current Principal Place of Business:**

6103 SW 191 AVENUE  
PEMBROKE PINES, FL 33332

**Current Mailing Address:**

21001 PINES BLVD.  
298254  
HOLLYWOOD, FL 33029 US

**FEI Number:** 81-1049589

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

LESCHHORN, ARMINDA I  
6103 SW 191 AVENUE  
PEMBROKE PINES, FL 33332 US

*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

**Officer/Director Detail :**

Title P  
Name LESCHHORN, ARMINDA I  
Address 6103 SW 191 AVENUE  
City-State-Zip: PEMBROKE PINES FL 33332

Title VP  
Name LESCHHORN, FRANZ A  
Address 6103 SW 191 AVENUE  
City-State-Zip: PEMBROKE PINES FL 33332

*I hereby 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 all other like empowered.*

**SIGNATURE:** ARMINDA I LESCHHORN

**PRESIDENT**

**02/28/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date