

2022 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F93000001721

Entity Name: ARBOR HOLDINGS CORP.**Current Principal Place of Business:**4835 COLLINS AVENUE
SUITE 801
MIAMI BEACH, FL 33140**Current Mailing Address:**PO BOX 140668
CORAL GABLES, FL 33114 US**FEI Number:** 13-3547663**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**M.J.F. REGISTERED AGENT CORP
153 SEVILLA AVE
CORAL GABLES, FL 33134 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 DP
Name MURRAY, JACQUES G
Address 11 RUE DU THEATRE
City-State-Zip: MONTREUX 1820

Title DIRECTOR
Name LEON, MARIE-CLAIRE
Address 1017 NORTH BEVERLY DRIVE
City-State-Zip: BEVERLY HILLS CA 90210

Title AS
Name MARQ, FREDERIC
Address 4835 COLLINS AVENUE
City-State-Zip: MIAMI BEACH FL 33140

Title SECRETARY
Name SIMMONDS, JOEL L.
Address 4835 COLLINS AVENUE
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR, VP
Name MURRAY, JEAN-JACQUES
Address COLUMBIA PALACE
11 PRINCESS GRACE APPARTEMENT
C1-32-1
City-State-Zip: MONACO 98000

Title DIRECTOR
Name MIGNOLET, XAVIER
Address INDUSTRIALAN 35
City-State-Zip: 1702 GROOT-BIJGAARDEN

Title DIRECTOR
Name MURRAY, JEAN-PIERRE
Address 1017 NORTH BEVERLY DRIVE
City-State-Zip: BEVERLY HILLS CA 90210

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: JOEL L. SIMMONDS**SECRETARY****06/05/2022**

Electronic Signature of Signing Officer/Director Detail

Date