

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 370233

FILED  
Apr 07, 2012  
Secretary of State

Entity Name: ARTURNERI, INC.

**Current Principal Place of Business:**

8770 SUNSET DR., #245  
MIAMI, FL 331733512

**New Principal Place of Business:**

**Current Mailing Address:**

8770 SUNSET DR., #245  
MIAMI, FL 331733512

**New Mailing Address:**

FEI Number: 33-1118337

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ZACARIAS, ALBERTO N  
Address: 555 BRYANT STREET #176  
City-St-Zip: PALO, CA 94301

Title: VD  
Name: ZACARIAS, ALBERTO N  
Address: 555 BRYANT STREET #176  
City-St-Zip: PALO ALTO, CA 94301

Title: SD  
Name: ZACARIAS, ALBERTO N  
Address: 555 BRYANT STREET #176  
City-St-Zip: PALO ALTO, CA 94301

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: ALBERTO N ZACARIAS

PD

04/07/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date