

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2002 8:00 am
Secretary of State

05-16-2002 90045 040 ***158.75

DOCUMENT # 546341
1. Entity Name
ARNONE INC.

Principal Place of Business
1 S.E. 4TH STREET
LEE'S SUMMIT MO 64063
Mailing Address
1 S.E. 4TH STREET
LEE'S SUMMIT MO 64063



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip
Country

4. FEI Number 59-1756911
Applied For
Not Applicable
5. Certificate of Status Desired [checked] \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
ARNONE, CHARLES V.
2001 SW 19TH STREET
MIAMI FL 33145

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
1440 NAVIGATOR
City PORT CHARLOTTE FL Zip Code 33983

8. 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 [Signature] CHARLES V. ARNONE - PRINCIPLE DATE 4/25/2002

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. []

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. [] \$5.00 May Be Added to Fees

Table with 2 columns: OFFICERS AND DIRECTORS, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Rows include ARNONE, CHARLES VINCENT, MORALES, ALFREDO, ADAMS, THOMAS W.

Table with 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Rows include ST EILKEN ZIDZIUNAS.

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] CHARLES V. ARNONE 4/25/2002 (816)525-8455
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)