

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 588260

FILED
Jan 05, 2006
Secretary of State

Entity Name: ARROW PAVEMENT SERVICES, INC.

Current Principal Place of Business:

3936 S SEMORAN BLVD
#118
ORLANDO, FL 32822

New Principal Place of Business:

Current Mailing Address:

3936 S SEMORAN BLVD
#118
ORLANDO, FL 32822

New Mailing Address:

FEI Number: 59-1861613

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUMPZA, GLORIA
2242 FENTON AVE.
CLERMONT, FL 34711 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RUMPZA, GLORIA W
Address: 2242 FENTON AVENUE
City-St-Zip: CLERMONT, FL 34711

Title: T () Delete
Name: RUMPZA, GARY T.,
Address: 6765 NARCOOSEE RD.
City-St-Zip: ORLANDO, FL

Title: VP () Delete
Name: RUMPZA, RICKY A.
Address: 5337 CONWAY OAKS CT
City-St-Zip: ORLANDO, FL

Title: VP () Delete
Name: CARVER, SHERRI L.,
Address: 2434 PALM CREEK AVENUE
City-St-Zip: ORLANDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: RUMPZA, GARY T.,
Address: 4155 DEENSTILL ROAD
City-St-Zip: POLK CITY, FL 33868

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 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: SHERRI L. CARVER

VP

01/05/2006

Electronic Signature of Signing Officer or Director

Date