FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** Jan 20 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (3)A.R.C. INVESTMENTS, INC. Principal Place of Business Mailing Address 7747 DAVIE RD. EXT. 7747 DAVIE RD. EXT. DAVIE FL 33024 DAVIE FL 33024 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/03/1980 2a. Mailing Address 4. FEI Number 2. Principal Place of Business 59-2020987 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 22 27 City & State City & State 6. Election Campaign Financing Trust Fund Contribution 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 24 25 29 30 10, Name and Address of New Registered Agent g. Name and Address of Current Registered Agent 81 Name AUGUSTINE, CAROLYN 2701 SW 45 ST Street Address (P.O. Box Number is Not Acceptable) 38310 **DANIA FL 33312** 83

11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

84 City

SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE V 75 Addition 1.1 TITLE Change TITLE AUGUSTINE, RICHARD NAME 1.2 NAME Richard Hug 2761 S.W. 45 ST. STREET ADDRESS 1.3 STREET ADDRESS **DANIA FL 33312** 1.4 CITY - ST - ZIP CITY-ST-ZIP **K** Change Addition SVD DELETE TITLE 2.1 TITLE SUD Carolyn Augustine AUGUSTINE, CAROLYN E. 2.2 NAME NAME 2761 S.W. 45 STREET 4471 'SW 34 Dr STREET ADDRESS 2.3 STREET ADDRESS **DANIA FL 33312** 2.4 CITY-ST-ZIP CHTY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition 4 1 TITLE TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-S1-ZIP DELETE Change Addition 51 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STHEET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change DELETE Addition 6.1 TITLE TITLE 6.2 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP

14. Thereby 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 annual report or supplemental annual 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 trusted enipowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, or on an altrophent with an address.

1-8- 90/10ml Maz-5211

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Zip Code

Not Applicable