## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT #696052**

1. Entity Name

ARCÓ AUTOMOTIVE PRODUCTS, INC.



Principal Place of Business

% RONALD L. MILLER 3921 NAVY BI VD

3921 NAVY BLVD PENSACOLA, FL 32507-8296 Mailing Address

% RONALD L. MILLER 3921 NAVY BLVD PENSACOLA, FL 32507-8296

## FILED Feb 11, 2008 8:00 am Secretary of State

02-11-2008 90042 034 \*\*\*158.75



01032008

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2110489

10/

Not Applicable

Applied For

5. Certificate of Status Desired

\$8.75 Additional Fee Required

-	<sup>−</sup> 6.	Name and Address of Current Registered Agent

MILLER, RONALD,L 3921 NAVY BLVD PENSACOLA, FL 32507

## DO NOT WRITE IN THIS SPACE

	(2) (4)							
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. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE	Signature, typed or printed name of registered agent and title it	applicable (NOTE: Registered /	Agent signature	e required when reinstating)	DATE			
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	<ol><li>Election Campaign Finance Trust Fund Contribution.</li></ol>	ing 🗌	\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	TORS						
TITLE	PT							
NAME	MILLER, RONALD L							
STREET ADDRESS	s 3921 NAVY BLVD.							
CITY-ST-ZIP	PENSACOLA, FL							
TIFLE VPS								
NAME MILLER, JANICE R								
STREET ADDRESS								
CITY-ST-ZIP	PENSACOLA, FL							
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CITY-ST-ZIP								
TITLE								

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplied entail 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 10 or Block 11 if changed, or on an attachment with an address, with all time reports.

SIGNATURE:

STREET ADDRESS CITY - ST - ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Date

Daytime Phone #