


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 13, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # F29607**  
 1. Entity Name  
**ARIEL EXPORTS, INC.**



Principal Place of Business      Mailing Address  
**6352 NW 173 STREET**      **103 NORTH CRABTREE KNOLL**  
**MIAMI, FL 33015 US**      **CHAPEL HILL, NC 27514 US**

U00000465840  
 03/22/06-80050-021 150.00



01132006 No Chg-P CF2E034 (11/05)

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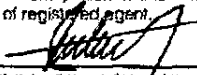
4. FEI Number      Applied For  
**59-2091391**      Not Applicable

5. Certificate of Status Desired            **\$8.75 Additional Fee Required**

8. Name and Address of Current Registered Agent  
**BATARSE, JOSE ENRIQUE**  
**6352 NW 173RD STREET**  
**MIAMI, FL 33015**

**DO NOT WRITE IN THIS SPACE**

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 if applicable.      (NOTE: Registered Agent signature required when resetting)      DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.            **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BATARSE, JOSE ENRIQUE 6352 NW 173 STREET MIAMI, FL 33015
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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, will, or other like empowered.

SIGNATURE:   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/03/06  
Date

Daytime Phone #