

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 24, 2001 8:00 am
Secretary of State

07-24-2001 90015 025 ***158.75

DOCUMENT # G10307

1. Entity Name
ARRIOLA EQUUS, INC.



Principal Place of Business % JOSEPH R ARRIOLA 13449 N. W. 42ND AVENUE MIAMI FL 33054	Mailing Address % JOSEPH R ARRIOLA 13449 N. W. 42ND AVENUE MIAMI FL 33054
---	---



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 13975 NW 58 Court Suite, Apt. #, etc.	3. Mailing Address 13975 NW 58 Court Suite, Apt. #, etc.
---	---

City & State Miami Lakes, FL	City & State Miami Lakes, FL
Zip - 33014	Country USA

4. FEI Number 59-2227217	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent ARRIOLA, JOSEPH R 13225 NW 42ND AVENUE MIAMI FL 33054	7. Name and Address of New Registered Agent Name - Street Address (P.O. Box Number is Not Acceptable) 13975 NW 58 Court City Miami Lakes FL Zip Code 33014
---	--

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  7-16-01 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>
--

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$550.00 After September 12, 2001 Fee will be \$750.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
--	--	---

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST ARRIOLA, JOSEPH R 13225 NW 42ND AVENUE MIAMI FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 13975 NW 58 Court Miami Lakes, FL 33014
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARRIOLA, JOSEPH R 13225 NW 42ND AVENUE MIAMI FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 13975 NW 58 Court Miami Lakes, FL 33014
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 REQUIRED <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	7-16-01 <small>Date</small>	(305) 523-1167 <small>Daytime Phone #</small>
---	---------------------------------------	---

002710 AV

CR2E034 (5/01)

A0079324

Attachment

#610307

Arriola Equus, Inc.
13975 NW 58 Court
Miami Lakes, FL 33014

July 16, 2001

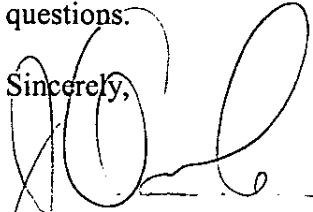
Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

In the past couple of months we moved to a new location. Unfortunately, we never received the previous correspondence for renewal; the US Post Office must have misplaced it with the move.

Enclosed is our payment of \$158.75. Please feel free to contact us if you have any questions.

Sincerely,



Joseph R. Arriola
Officer

op

Enclosures