FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K33842

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90193 001 ***158.75

i. Corporatio					
ARSI H	OLDINGS, INC.				
Principal Place	ce of Business	Mailing Address			BY DIREK BYRK BYRK BYRK DIREK BYRK HORK
250 TAMPA AVE W. 250 TAMPA AVE W.					
VENICE FL 34285 VENICE FL 34285					
				DO NOT WRITE II	N THIS SPACE
				3. Date Incorporated or Qualifed	
Principal Place of Business 2a, Mailing Address				09/23/1988 — 4. FEI Number	Applied For
21 3320 Handre Dr		26 C/O Caldwell Trust Co.		65-0072188	Not Applicable
Suite, Apt. #, etc.		Suite Apt. #. etc.			£0.75
22 20 / Contin		(Ca)	5. Certifcate of Status Desired	Fee Required	
City & Sta		City & State		6. Election Campaign Financing	\$5.00 May Be
23 Ven	•	28 Vennie Fl		Trust Fund Contribution	Added to Fees
24 Zip 34	292 Country USA	Zip 34292 3	Country 814	8. This corporation owes the current y	year Intangible ☐ Yes ☐ No
24	9. Name and Address of Current	25 2 1 3	0	Personal Property Tax. 10. Name and Address of New Regis	
			81 Name	Robert Colde	11 10
	DWELL, ROLAND G., JR		82 Street Ad	dress (P.O. Box Nymber is Not Acceptable)	ai, sic
250 TAMPA AVE W.			62 Street At	2.320 Hordle VK	ا . أ
VENICE FL 34285			83		
			84 City		REST Zim-Cortex of a
				Ven ice	FL 39792
11. Pursuant	to the provisions of Sections 607.0502	and 607 180 , Florida Statutes	, the above-named co	propriation submits this statement for the purpertion's board of directors. I hereby accept the	oose of changing its registered
agent. I a	am familiar with, and accept the obligation	ons of Section 607.0505, Florid	la Statutes.		30.60
SIGNATURE		1/ Rogar	NG Caldu		29144
12.	Signature, typed or printed name of registered agent OFFICERS AND	<u> </u>	egistered Agent signature requ	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TITLE	DST	☐ DELETE	1.1 TITLE		Change Addition
NAME	KRAUT, MARYANN C	•	1.2 NAME		
STREET ADDRESS			1.3 STREET ADDRESS		
CITY-ST-ZIP	VENICE FL		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE	,	☐ Change ☐ Addition
NAME'	PECHEUX, DEBORAH		2.2 NAME		,
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP	SUGARLAND TX		2. 4 CITY-ST-ZIP		
TITLE	DP CALDIMELL POLAND C ID	☐ DELETE	31 TITLE ~	ومصيفاة المسابق الماليان بعضيا	Change Addition
NAME	CALDWELL, ROLAND G., JR 250 TAMPA AVE W.		3.2 NAME	3730 No roles De	
STREET ADDRESS	VENICE FL		3.3 STREET ADDRESS	3320 Hardee Dr.	,
TITLE	VEHOL I C	☐ DELETE	34. CITY-ST-ZIP	source I a Difference	☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	}		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		}
STREET ADDRESS	1		5,3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		·
TITLE	1	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		1
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental angual report in 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 of trustees impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with a address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR