2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED **DOCUMENT # K33842** Feb 16, 2000 8:00 am 1. Entity Name **Secretary of State** ARSI HOLDINGS, INC. 02-16-2000 90036 015 ***158.75 Mailing Address 3320 HARDEK DŔ C/O CALDWELL TRUST CO venice fl 34292 201 CENTER RD VENICE FL 34292-3528 US 2. Principal Place of Business 3. Mailing Address 3320 H<u>arde</u> DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0072188 Not Applicable Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CALDWELL, ROLAND G., JR Street Address (P.O. Box Number is Not Acceptable) 3320 HARDEE DR VENICE FL 34292 Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. DST Change ☐ Addition ☐ Delete TITLE TITLE KRAUT, MARYANN C NAME **428 PALMETTO COURT** STREET ADDRESS STREET ADDRESS VENICE FL CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE PECHEUX, DEBORAH NAME NAME STREET ADDRESS 1911 OAKHURST PARKWAY STREET ADDRESS CITY-ST-ZIP CITY-S1-2IP SUGARLAND TX DΡ ☐ Change ☐ Addition T(T) F ☐ Delete TITLE CALDWELL, ROLAND G., JR NAME NAME 3320 HARDEE DR STREET ADDRESS STREET ADDRESS VENICE FL 34292 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ... ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information symboled 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 the 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 employed 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 a statute of the corporation of the receiver of trustee employed 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 a statute of the corporation of the corporation

Callwell Jr. Pres. 040400