

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

27. **FILED**  
**Mar 16, 2006 8:00 am**  
**Secretary of State**  
02-24-2006 90002 012 \*\*\*150.00

<b>DOCUMENT # L23080</b> 1. Entity Name <b>ARBORS RECORDS, INC.</b>					
Principal Place of Business <b>2189 CLEVELAND ST #225 CLEARWATER, FL 33765</b>			Mailing Address <b>2189 CLEVELAND ST #225 CLEARWATER, FL 33765</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number <b>59-2976186</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent  <b>DOMBER, RACHEL 2189 CLEVELAND STREET 225 CLEARWATER, FL 33765</b>				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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 _____ (NOTE: Registered Agent's signature required when registering) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DP DOMBER, MATTHEW J. 8121 PALMA DEL MAR BLVD. ST. PETERSBURG, FL 33741</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DVPT DOMBER, RACHEL 8121 PALMA DEL MAR BLVD. ST. PETERSBURG, FL 33741</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DS WARD, JACK B. 20 VESEY ST. NEW YORK, NY 10007</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>CLAUDIA BLORCZYK AS 10 VALENCIA CIRCLE SAFETY HARBOR, FL 34685</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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, with all other like empowered.					
<b>SIGNATURE:</b> _____ <b>727-466-0571</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

ATTACHMENT  
66005563

**ARBORS RECORDS, INC.**

2189 Cleveland St. Suite 225

Clearwater, Florida 33765

(727) 466-0571 1-800-299-1930 Fax (727) 466-0432

www.arborsrecords.com e-mail: mrd@gate.net

March 13, 2006

Florida Department of State  
Division of Corporations  
P O Box 1500  
Tallahassee FL 32302-1500


Reference Number: L23080

Dear Sir/Madam,

We are returning the Corporate Report for Arbors Records Inc. Please note that we now show Claudia Florczyk as Assistant Secretary.

We trust that this is the correction that you require.

Sincerely,

  
Matthew J. Domber  
President

Enc.



ATTACHMENT  
66005503

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 28, 2006

ARBORS RECORDS, INC.  
2189 CLEVELAND ST  
#225  
CLEARWATER, FL 33765

Subject: ARBORS RECORDS, INC.

Reference Number: L23080

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report has not been filed and a copy is being returned for the following correction(s):

Provide the title(s) of each officer/director listed on the report or on an attachment.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/CD

ANNUAL REPORTS SECTION