2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2006 8:00 am
Secretary of State
02-16-2006 90037 005 ***150.00

DOCUMENT # L50022

1. Entity Name
ARE-JAY INVESTMENTS OF INDIAN RIVER COUNTY, INC.

Principal Place of Business	Mailing Address
3800 -20 ST VERO BEACH, FL 32960	P O BOX 0 VERO BEACH, FL 32961

DO NOT WRITE IN THIS SPACE

02022006   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-0181908	Not Applicable

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

6. Name and Address of Current Registered Agent

BRACKETT, ROBERT A
2066 -14TH AVE
VERO BEACH, FL 32960

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 reinstating)   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	D
NAME	BRACKETT, ROBERT A. II
STREET ADDRESS	1645 51ST CT
CITY-ST-ZIP	VERO BEACH, FL

TITLE	D
NAME	PRIETO, JOSE
STREET ADDRESS	875 ROYAL PALM BLVD.
CITY-ST-ZIP	VERO BEACH, FL 32961

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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.

SIGNATURE: _____ JOSE A. PRIETO   2/1/06   772 567-5113
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #