## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT #L50389

1. Entity Name ARNOLA, INC.



Principal Place of Business

301 W. CAMINO GRDNS BLVD SUITE 101

BOCA RATON, FL 33432 US

Mailing Address

301 W. CAMINO GRDNS BLVD SUITE 101

BOCA RATON, FL 33432 US

FILED Feb 25, 2008 08:00 AM Secretary of State



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01102008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0172043 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DEMPSEY, W. GLENN 505 S FLAGLER DR SUITE 1330 WEST PALM BEACH, FL 33401

NAME STREET ADDRESS CITY-ST-ZIP

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the purpose of changions of registered agent.	ing its registered	d office or reg	istered agent, or bo	th, in the State of Florida I ar	n familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and little if applicable	MOTE B				··
<del></del>	оциалия, турес от ринно талия спедациясь agent and или и аррисаом	(NOTE: Hegistered	Agent signature re-	quired when reinstating)	DATE	
FIL After Ma		Campaign Financ d Contribution.		\$5.00 May Be Added to Fees	00000083696 03/04/08-80036	
10.	OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD BAILEY, STEPHEN M. 301 W. CAMINO GARDENS BLVD, #101 BOCA RATON, FL 33432					
TITLE	VTD		·			•
NAME STREET ADDRESS	BAILEY, GARY S.				en de la companya del companya de la companya del companya de la c	and the said
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TITLE					**	
NAME STREET ADDRESS				•		
CITY-ST-ZIP		•				
TITLE						

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report of 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 greater by truction 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 of an like entractions.

SIGNATURE STATUTE NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

Date