

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

FILED  
Mar 19 1997 8:00am  
Secretary of State

|                                                |                                                                                   |                                                                                                    |
|------------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| PROFIT<br>CORPORATION<br>ANNUAL REPORT<br>1997 |  | FLORIDA DEPARTMENT OF STATE<br>Sandra B. Mortham<br>Secretary of State<br>DIVISION OF CORPORATIONS |
|------------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|

DOCUMENT # L65066

(7)

1. Corporation Name  
ARLEN GROUP, INC.

Principal Place of Business

15 STILLWRIGHT WAY  
KEY LARGO FL 33037

Mailing Address

15 STILLWRIGHT WAY  
KEY LARGO FL 33037-2928



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

SWENTEK, RICHARD A.  
15 STILLWRIGHT WAY  
KEY LARGO FL 33037

3. Date Incorporated or Qualified

04/11/1990

3a. Date of Last Report

04/10/1996

4. FEI Number

65-0340847

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐

Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and brief appointment

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

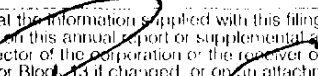
|                |                              |                                            |
|----------------|------------------------------|--------------------------------------------|
| TITLE          | CP                           | <input type="checkbox"/> DELETE            |
| NAME           | SWENTEK, RICHARD A.          |                                            |
| STREET ADDRESS | 15 STILLWRIGHT WAY           |                                            |
| CITY-ST-ZIP    | KEY LARGO FL                 |                                            |
| TITLE          | DST                          | <input type="checkbox"/> DELETE            |
| NAME           | SWENTEK, SANDRA N            |                                            |
| STREET ADDRESS | 15 STILLWRIGHT WAY           |                                            |
| CITY-ST-ZIP    | KEY LARGO FL                 |                                            |
| TITLE          | <del>DV</del>                | <input checked="" type="checkbox"/> DELETE |
| NAME           | <del>GRAY, SARA</del>        |                                            |
| STREET ADDRESS | <del>128 PIRATES DRIVE</del> |                                            |
| CITY-ST-ZIP    | <del>KEY LARGO FL</del>      |                                            |
| TITLE          |                              | <input type="checkbox"/> DELETE            |
| NAME           |                              |                                            |
| STREET ADDRESS |                              |                                            |
| CITY-ST-ZIP    |                              |                                            |
| TITLE          |                              | <input type="checkbox"/> DELETE            |
| NAME           |                              |                                            |
| STREET ADDRESS |                              |                                            |
| CITY-ST-ZIP    |                              |                                            |
| TITLE          |                              | <input type="checkbox"/> DELETE            |
| NAME           |                              |                                            |
| STREET ADDRESS |                              |                                            |
| CITY-ST-ZIP    |                              |                                            |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                    |                                                                   |
|--------------------|-------------------------------------------------------------------|
| 1.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME           |                                                                   |
| 1.3 STREET ADDRESS |                                                                   |
| 1.4 CITY-ST-ZIP    |                                                                   |
| 2.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME           |                                                                   |
| 2.3 STREET ADDRESS |                                                                   |
| 2.4 CITY-ST-ZIP    |                                                                   |
| 3.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME           |                                                                   |
| 3.3 STREET ADDRESS |                                                                   |
| 3.4 CITY-ST-ZIP    |                                                                   |
| 4.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME           |                                                                   |
| 4.3 STREET ADDRESS |                                                                   |
| 4.4 CITY-ST-ZIP    |                                                                   |
| 5.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME           |                                                                   |
| 5.3 STREET ADDRESS |                                                                   |
| 5.4 CITY-ST-ZIP    |                                                                   |
| 6.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME           |                                                                   |
| 6.3 STREET ADDRESS |                                                                   |
| 6.4 CITY-ST-ZIP    |                                                                   |

14. I do hereby certify that the information supplied with this filing does not contain any false or misleading information. I further certify that the information indicated on this annual report or supplemental annual report is true and correct. I am an officer or director of the corporation or the receiver or trustee of the corporation and I have the same legal effect as if made under oath; that appears in Block 12 or Block 13 if changed, or on an attachment with a true and correct copy of the same, and that my name is as shown in Block 12 or Block 13 if changed, or on an attachment with a true and correct copy of the same.

SIGNATURE



RICHARD A. SWENTEK  
15 STILLWRIGHT WAY  
KEY LARGO, FL 33037

MAR 12 1997

305-453-0303

CR2E034 (9/96)