

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90133 007 ***158.75

DOCUMENT # M35728

1. Corporation Name
ARRO BUILDERS CORP.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
C/O RAMON L. ARRONTE
745 SW 35TH AVE
MIAMI FL

Mailing Address
C/O RAMON L. ARRONTE
745 SW 35TH AVE
MIAMI FL

3. Date Incorporated or Qualified

07/24/1986

4. FEI Number

59-2820851

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business
21 330 SW 27TH AVE.

2a. Mailing Address
26 330 SW 27TH AVE.

Suite, Apt. #, etc.

22 406

Suite, Apt. #, etc.

27 406

City & State
23 MIAMI FL.

City & State
28 MIAMI FL.

Zip Country
24 33135 25 U.S.A.

Zip Country
29 33135 30 U.S.A.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ARRONTE, RAMON L.
745 SW 35TH AVE
MIAMI FL

81 Name RAMON L. ARRONTE

82 Street Address (P.O. Box Number is Not Acceptable)
2655 COLLINS AVE.

83 APT. 1203

84 City MIAMI BEACH FL 85 Zip Code 33140

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE V ☐ DELETE
NAME ARRONTE, JORGE F
STREET ADDRESS 745 SW 35 AVE
CITY-STATE-ZIP MIAMI FL

1.1 TITLE VICE PRESIDENT ☒ Change ☐ Addition
1.2 NAME ARRONTE, JORGE F.
1.3 STREET ADDRESS 2323 SW 20 ST.
1.4 CITY-STATE-ZIP MIAMI FL 33145

TITLE P ☐ DELETE
NAME ARRONTE, RAMON L.
STREET ADDRESS 745 SW 35TH AVE
CITY-STATE-ZIP MIAMI FL

2.1 TITLE PRESIDENT ☒ Change ☐ Addition
2.2 NAME ARRONTE, RAMON L.
2.3 STREET ADDRESS 2655 COLLINS AVE APT 1203
2.4 CITY-STATE-ZIP MIAMI BEACH FL. 33135

TITLE M ☐ DELETE
NAME ARRONTE, RAMON J.
STREET ADDRESS 2323 SW 20 ST.
CITY-STATE-ZIP MIAMI FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

TITLE S ☐ DELETE
NAME ARRONTE, EVA M
STREET ADDRESS 2323 SW 20 ST
CITY-STATE-ZIP MIAMI FL

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

14. I hereby certify that the information supplied 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address with all other information empowered.

SIGNATURE:

Ramon L. Arrote

3-29-99 305-642-6100

CR2E034 (11/98)