

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2002 8:00 am
Secretary of State

04-02-2002 90968 018 ***150.00

DOCUMENT # M80345

1. Entity Name
ARLA INVESTMENTS CORP.

Principal Place of Business

**2300 CORAL WAY
 SUITE 200
 MIAMI FL 33145
 US**

Mailing Address

**2300 CORAL WAY
 SUITE 200
 MIAMI FL 33145
 US**

2. Principal Place of Business

2300 Coral Way

3. Mailing Address

2300 Coral Way

Suite, Apt. #, etc.

Suite # 200

Suite, Apt. #, etc.

Suite # 200

City & State

Miami, Florida

City & State

Miami, Florida

Zip

33145

Country

US

Zip

33145

Country

US

6. Name and Address of Current Registered Agent

FLORIDA ANNUAL REPORT SERVICES, INC.

2300 CORAL WAY

SUITE 200

MIAMI FL 33145

7. Name and Address of New Registered Agent

Name

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

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

AMADA CANTERA LOPEZ, President

(NOTE: Registered Agent signature required when reinstating)

DATE

3/24/02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	ARTILES, JORGE	
STREET ADDRESS	11171 S.W. 60TH TERRACE	
CITY-ST-ZIP	MIAMI FL 33173	
TITLE	TD	<input type="checkbox"/> Delete
NAME	RAMON, ARTILES	
STREET ADDRESS	2503 S.W. 11TH STREET	
CITY-ST-ZIP	MIAMI FL 33130	
TITLE	VD	<input type="checkbox"/> Delete
NAME	ARTILES, LAURA	
STREET ADDRESS	2503 S.W. 11TH STREET	
CITY-ST-ZIP	MIAMI FL 33130	
TITLE	VDD	<input type="checkbox"/> Delete
NAME	ARTILES, ELENA	
STREET ADDRESS	11171 S.W. 60TH TERRACE	
CITY-ST-ZIP	MIAMI FL 33173	
TITLE	SD	<input type="checkbox"/> Delete
NAME	ARTILES, JORGE R	
STREET ADDRESS	11171 S.W. 60TH TERRACE	
CITY-ST-ZIP	MIAMI FL 33173	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/02

Date

Daytime Phone #

CR2E034 (9/01)