

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000099228

FILED
Apr 28, 2003
Secretary of State

Entity Name: ARB MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

9796 NW 51ST TERRACE
MIAMI, FL 33178

New Principal Place of Business:

Current Mailing Address:

C/O MCCARRON, FOX & ELJAEK, P.A.
815 PONCE DE LEON BLVD 3RD FLOOR
CORAL GABLES, FL 33134

New Mailing Address:

C/O ATER REGISTERED AGENTS, LLC
2601 SOUTH BAYSHORE DRIVE, STE 600
COCONUT GROVE, FL 33133 US

FEI Number: 58-2585075

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCARRON, FOX & ELJAEK, P.A.
815 PONCE DE LEON BLVD
3RD FLOOR
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

ATER REGISTERED AGENTS, LLC
2601 SOUTH BAYSHORE DRIVE
SUITE 600
COCONUT GROVE, FL 33133 US

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: SANTIAGO ELJAEK III, MANAGER

04/28/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BURCKHARDT, HERMANN
Address: 9796 NW 51ST TERRACE
City-St-Zip: MIAMI, FL 33178

Title: D () Delete
Name: BURCKHARDT, ALBERTO
Address: 9796 NW 51ST TERRACE
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HERMANN BURCKHARDT

D

04/28/2003

Electronic Signature of Signing Officer or Director

Date