2006 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL RI	EPORI	
DOCUMENT # P.00000099693		FIL -
1. Entity Name		06 MAR - 1 M 8:55
ARIEL HOMES OF TAMPA, INC.		06 _{l'AR} ,
		M 8:55
Principal Place of Business Ma	illing Address	13.75
•	281 EHRLICH RD.	
	AMPA, FL 33624	· · · · · · · · · · · · · · · · · · ·
DO NOT WRITE IN THIS SPACE		\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
		01252006 No Chg-P CR2E034 (11/05)
		4. FEI Number Applied For
		59-3674436 Not Applicable
		5. Certificate of Status Desired \$8.75 Additional
		Fee Required
6. Name and Address of Current Registered Agent		
QUINTELA, ARIEL J 5381 EHPLICH PD DO NOT WRITE		
TAMPA EL 2004		
IN		IN THIS SPACE
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. I am familiar with, and accept		
the abbigations of registered agent.		
SIGNATURE 1 25 06		
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE		
	6 Floation Compaign Figureian	****
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May B .300067332099 Added to Fe@3/(17/0601068001 **350, 00
10. OFFICERS AND DIRECTORS		
TITLE PDS		
NAME QUINTELA, ARIEL J		
STREET ADDRESS 5281 EHRLICH RD.		:
CITY-ST-ZIP TAMPA, FL 33624		
TITLE NAME		
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STREET ADDRESS CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP	line dans not on allie de alle	Third is Charter 440 Firstly County
12. I hereby certify that the information supplied with this findicated on this report or supplied and read read results.	and accurate and that my signature shall h	contained in Chapter 119, Florida Statutes. I further certify that the information have the same legal effect as if made under oath; that I am an officer or director
12. I hereby certify that the information supplied with this findicated on this report or supplied and read read results.	and accurate and that my signature shall h	contained in Chapter 119, Florida Statutes. I further certify that the information lave the same legal effect as if made under oath; that I am an officer or director apter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if
12. I hereby certify that the information supplied with this findicated on this report or supplied and read read results.	and accurate and that my signature shall h	ave the same legal effect as if made under gath; that I am an officer or director