


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000003700 1. Entity Name ARA INVESTMENTS, INC.	
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Principal Place of Business 3256 NW 24 ST RD MIAMI, FL 33142	Mailing Address 3256 NW 24 ST RD MIAMI, FL 33142
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01172004 No Chg-P CR2E034 (10/03)

4. FEI Number 31-1778645	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MATALON, ROBERTO
3256 NW 24 ST RD
MIAMI, FL 33142

**DO NOT WRITE
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 obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MEDEROS, ANTONIO 3256 NW 24 ST RD MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LLANES, ALFONSO 3256 NW 24 ST RD MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MATALON, ROBERTO 3256 NW 24 ST RD MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

000000042002
02/10/04-80005-016 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 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

Date

Daytime Phone #

Roberto Matalon 3/15/04 315(635-3060)