

FILED
Sep 15, 2002 8:00 am
Secretary of State

08-21-2002 90085 011 ***550.00

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **PO1000019808**

1. Entity Name

ARCOR INTERNATIONAL CORP.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

11450 INTERCHANGE CIR NORTH

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIRAMAR, FL

City & State

MIRAMAR, FL

4. FEI Number

65-1078460

Applied For

☐ Not Applicable

Zip

33025

Country

USA

Zip

33025

Country

USA

5. Certificate of Status Desired

☐ **8.75 Additional Fee Required**

7. Name and Address of Current Registered Agent

Name

NIKOLAS ARVANITOPOULOS

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

11450 INTERCHANGE CIRCLE NORTH

City

MIRAMAR

State

FL

Zip

33025

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 date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

10. Election Campaign Financing

Trust Fund Contribution.

☐

\$5.00 May Be

Added to Fees

11. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

DIRECTOR

NIKOLAS ARVANITOPOULOS

11450 INTERCHANGE CIRCLE NORTH

MIRAMAR, FL 33025

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

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)(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 11 or on an attachment with an address, with all other like information.

SIGNATURE

NIKOLAS ARVANITOPOULOS

8/13/02

305 651-8000