2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 07, 2006 8:00 am Secretary of State

04-07-2006 90026 044 ***150 00

DOCUMENT # P01000046449 1. Entity Name ARTHUR ARTHUR (MIAMI) INC.									04-07-2006	90026 044	‡ ***150	.00
Principal Place of Business 245 SE FIRST STREET STE 212 MIAMI, FL 33131 US			245 SE STE 21	Mailing Address 245 SE FIRST STREET STE 212 MIAMI, FL 33131 US			4004603J					
2. Principal Place of Business			3. Mailin	3. Mailing Address								
Suite, Apt. #, etc.			Suite,	Suite, Apt. #, etc.			03212	006	Chg-P	CR2E03	4 (11/05)	
City & State			City &	City & State			4. FEI 1	Number -0475			 	plied For Applicable
Zip	Country		Zip	Zip Count			5. Certi	ificate o	of Status Desired		8.75 Addi ee Required	
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent						
FOSTER-FELL, JEREMY 206 LOOKOUT DR APOLLO BEACH, FL 33572					s	Name FOSTER-FELL, JEREMY Street Address (P.O. Box Number is Not Acceptable) 245 JE FILST STREET SUITE 212						
					C	City MIA	mi Am (FL Zip Code					2,21
	named entity ions of regist	y submits this statement fered agent.	for the purpos	se of changing its			· • •	, or bath	n, in the State of Fi		miliar with, a	and accept
JIGHATORILL	Signature, typed	or printed name of registered ager	nt and title if applica	able. (NOTE	: Registered Age	ent signatura raqui	ared when reinsta	iting)		DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Fina Trust Fund Contribution.							5.00 May added to Fee					
10.		OFFICERS ANI	D DIRECTORS	S	11.		ADDIT	IONS/C	CHANGES TO OF	FICERS AND I	DIRECTORS	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP							45 SE (AM) F		7 STREET, 33131		☐ Change	☐ Addition
TITLE	CFO			Delete	TITLE						☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	DAVIS, SIMON 300 BISCAYNE BLVD WAY STE 723 MIAMI, FL 33131						45 SE Amı, E		6T STKEZI 33131	STE.	212	
TITLE NAME STREET ADORESS CITY-ST-ZIP		FELL, JEREMY AYNE BLVD WAY ST	E 723	☐ Delete	TITLE NAME STREET A CITY-ST-	DORESS 24	45 5E AM(, A	FIRE	57 STRÆ&; 38181		□ Change	Addition Addition
TITLE NAME STREET ADORESS CITY-ST-ZIP		- 30101		☐ Delete	TITLE NAME STREET A CITY-ST-	DORESS	<i></i>		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET A CITY-ST-						☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete	TITLE NAME STREET A CITY-ST-	- ZIP					☐ Change	☐ Addition
12. I hereby indicated of the collapsed	certify that the don this reporporation or to l, or on an att	e information supplied w rt or supplemental record he regeiver or trustee of achinent with an add ess	ith this filing of is true and a powered to s, with all other	tes not qualify to curate and that n xecute this report r like empowered.	or the exemple of the	ptions contair e shall have the by Chapter f	ned in Chap he same leg 607, Florida	ter 119 al effec Statute	, Florida Statutes. t as if made under s; and that my nar	I further certil r oath; that I ar me appears in	y that the in n an officer Block 10 or	nformation or director r Block 11 if

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: