

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000084238

FILED
Apr 29, 2004
Secretary of State

Entity Name: ARISA INC.

Current Principal Place of Business:

18671 COLLINS AVENUE
1802
SUNNY ISLES, FL 33160

New Principal Place of Business:

18671 COLLINS AVENUE
1404
SUNNY ISLES, FL 33160

Current Mailing Address:

18671 COLLINS AVENUE
1802
SUNNY ISLES, FL 33160

New Mailing Address:

18671 COLLINS AVENUE
1404
SUNNY ISLES, FL 33160

FEI Number: 65-1147463

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIRMAN, IGAL
18671 COLLINS AVENUE
1802
SUNNY ISLES, FL 33160

Name and Address of New Registered Agent:

BIRMAN, IGAL
18671 COLLINS AVENUE
1404
SUNNY ISLES, FL 33160

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:

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BIRMAN, IGAL
Address: 18671 COLLINS AVENUE
City-St-Zip: SUNNY ISLES, FL 33160

Title: VSD () Delete
Name: BIRMAN, SARA
Address: 18671 COLLINS AVENUE
City-St-Zip: SUNNY ISLES, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BIRMAN, IGAL
Address: 18671 COLLINS AVENUE APT 1404
City-St-Zip: SUNNY ISLES, FL 33160

Title: VSD (X) Change () Addition
Name: BIRMAN, SARA
Address: 18671 COLLINS AVENUE APT 1404
City-St-Zip: SUNNY ISLES, FL 33160

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: IGAL BIRMAN

PSD

04/29/2004

Electronic Signature of Signing Officer or Director

Date