

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000102875

Entity Name: ARLOTTA ASSOCIATES, INC.

FILED  
Jan 04, 2005  
Secretary of State

## Current Principal Place of Business:

PO BOX 9132  
CORAL SPRINGS, FL 33075

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 9132  
CORAL SPRINGS, FL 33075

## New Mailing Address:

FEI Number: 65-1145201

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ARLOTTA, CRAIG L  
9662 B BOCA GARDENS CIRCLE NORTH  
BOCA RATON, FL 33496 US

## Name and Address of New Registered Agent:

ARLOTTA, CRAIG L  
4844 N. STATE ROAD 7  
201  
COCONUT CREEK, FL 33063 US

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: CRAIG ARLOTTA

01/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ARLOTTA, CRAIG L  
Address: 9662 B BOCA GARDNES CIRCLE N  
City-St-Zip: BOCA RATON, FL 33496

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ARLOTTA, CRAIG L  
Address: 4844 N. STATE ROAD 7 #201  
City-St-Zip: COCONUT CREEK, FL 33063 US

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: CRAIG ARLOTTA

PRES

01/04/2005

Electronic Signature of Signing Officer or Director

Date