

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2004 8:00 am
Secretary of State

03-01-2004 90035 030 ***158.75

DOCUMENT # P02000036991

1. Entity Name
ARCOR, INC.



Principal Place of Business
9800 W SAMPLE RD #C
CORAL SPRINGS, FL 33065

Mailing Address
9800 W SAMPLE RD #C
CORAL SPRINGS, FL 33065

54013449



2. Principal Place of Business
7618 Margate Blvd

3. Mailing Address
7618 Margate Blvd

01282004 Chg-P CR2E034 (10/03)

City & State
Margate FL

City & State
Margate FL

Zip
33063

Country
Broward

Zip
33063

Country
Broward

4. FEI Number
01-0659180

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MULLINS, JAMES G
2080 NW BOCA RATON BLVD #6
BOCA RATON, FL 33431

7. Name and Address of New Registered Agent

Name
Paul Rubin

Street Address (P.O. Box Number is Not Acceptable)
2080 NW Boca Raton Blvd #6

City
Boca Raton

FL

Zip Code
33431

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

(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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CORRALES, CARLOS A 9800 W SAMPLE RD #C CORAL SPRINGS, FL 33065 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ARGUELLO, VIGARNY 9800 W SAMPLE RD #C CORAL SPRINGS, FL 33065 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Arguello, Vigarny <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7618 Margate Blvd Margate FL 33063
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ARGUELLO, MARIA L 9800 W SAMPLE RD #C CORAL SPRINGS, FL 33065 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Arguello, Maria <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7618 Margate Blvd Margate FL 33063
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 2-24-04 (954) 933-9090

Daytime Phone #