


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 09, 2004 8:00 am**  
**Secretary of State**

07-09-2004 90007 006 \*\*\*150.00

<b>DOCUMENT # P02000037305</b>					
<b>1. Entity Name</b> ARLANDOC U.S.A., INC.					
<b>Principal Place of Business</b> 10035 NW 51 TERR MIAMI, FL 33178			<b>Mailing Address</b> 10035 NW 51 TERR MIAMI, FL 33178		
<b>2. Principal Place of Business</b> 10913 NW 30 STREET Suite, Apt. #, etc. # 100 City & State MIAMI FL Zip 33172 Country USA			<b>3. Mailing Address</b> 10913 NW 30 STREET Suite, Apt. #, etc. # 100 City & State MIAMI FL Zip 33172 Country USA		
<b>4. FEI Number</b> 02-0587864			<b>Applied For</b> <input type="checkbox"/> Not Applicable		
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>			<b>\$8.75 Additional Fee Required</b>		
<b>6. Name and Address of Current Registered Agent</b> SCHMITT, RAYMOND 10035 NW 51 TERR MIAMI, FL 33178			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
<b>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.</b> SIGNATURE: <i>Ray Schmitt</i> DATE: <i>06 July 2004</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004</b>		<b>9. Election Campaign Financing Trust Fund Contribution.</b> <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCHMITT, RAYMOND 10035 NW 51 TERR MIAMI, FL 33178	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCHMITT, RAYMOND 10035 NW 51 TERR MIAMI, FL 33178	<input type="checkbox"/> Delete			
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<b>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 persons empowered.</b>					
SIGNATURE: <i>Ray Schmitt</i> <i>RAYMOND SCHMITT</i> <i>06 July 2004</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

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07012004 Chg-P CR2E034 (10/03)

TEL 305 715 0102