

FILED

03 JUL -2 PM 1:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000081975

1. Entity Name  
ARANCIA CORP.Principal Place of Business  
4871 NW 112 CT  
MIAMI, FL 33178Mailing Address  
4871 NW 112 CT  
MIAMI, FL 33178

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

EIN 22-2861188

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional  
Fee Required☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

FLORES, ROBERTO  
4871 NW 112 CT  
MIAMI, FL 33178

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when substituting)

DATE

FILE NOW!!! FEE IS \$160.00  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State9. Election Campaign Financing  
Trust Fund Contribution. ☐\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
FLORES, ROBERTO  
4871 NW 112 CT  
MIAMI, FL 33178 ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ 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

June 6-03 305-775-7800  
Date Daytime Phone

CH2EC34 (10/02)

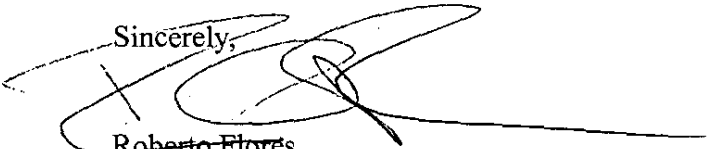
7/7/

A\*

Division of Corporations (Uniform Business Reports)

The purpose of this letter is to explain why I am paying the annual fee so late. I have been traveling and working hard due to the new business I am trying to open. I believe that I may have not seen the form or may have not received it by mail. It was just recently that I spoke with my accountant and became aware of the annual form. I am very sorry for the delay but I am very new to this and did not mean my actions.

Sincerely,



Roberto Flores

Arancia\*

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✉: Arancia@msn.com

🌐: www.arancia.com

📍: 4871 NW 112 CT Miami, FL 333178

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