2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 25, 2005 8:00 am Secretary of State DOCUMENT # P02000098950 04-25-2005 90276 044 ***150.00 1. Entity Name ARC 1818 ASSOCIATES, INC. Principal Place of Business Mailing Address 2070 NE 207TH STREET 2070 NE 207TH STREET MIAMI, FL 33179 MIAMI, FL 33179 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 04192005 Chg-P CR2E034 (10/03) Applied For City & State City & State 4. FEI Number 56-2295900 Not Applicable Country Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORCIA, MOISES Street Address (P.O. Box Number is Not Acceptable) 2070 NE 207TH STREET MIAMI, FL 33179 City 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. 1,14 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. President/ Director D ☐ Delete TITLE Change ☐ Addition TITLE CORCIA, MOISES NAME NAME 2070 NE 207TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33179 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP -- Delete ---TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Delete TITLE Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP Delete ☐ Change ■ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-7iP Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information a and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if I hereby certify that the information supplied with the indicated on this report or supplemental report is of the corporation or the receiver or trustee changed, or on an attachment

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