2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 31, 2005 08:00 AM Secretary of State

ANIOAL NEI ONI	Socretary of State
DOCUMENT # P03000018895 1. Entity Name BRUCE ARTHUR PROPERTIES, INC.	Secretary of State
Principal Place of Business Mailing Address	· · · · · · · · · · · · · · · · · · ·
800 DOUGLAS RD., #303 800 DOUGLAS RD., #303	<u> </u>
CORAL GABLES, FL 33134 CORAL GABLES, FL 33134	
	1 regress to small sum and and the same large sales and the
DO NOT WRITE IN THIS SPACE	01102005 No Chg-P CR2E034 (10/03)
DO NOT WHITE IN THIS SPACE	4. FEI Number Applied For Not Applied For Not Applied For
	5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent	1 66 hequited
RIEGLER, JAMES	DO NOT WRITE
9002 SW 152ND ST. MIAMI, FL 33157	
	IN THIS SPACE
 The above named entity submits this statement for the purpose of changing its registered off the obligations of registered agent. 	ice or registered agent, or both, in the State of Florida. I am familiar with, and accept -
SIGNATURE Signature, typed or printed name of registered agent and fille if applicable (NOTE Registered Agent	t signature required when reinstating) DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS	
TITLE PD	يو معيا
STREET ADDRESS 800 DOUGLAS RD., #303	
CITY-ST-ZIP CORAL GABLES, FL 33134	
TITLE NAME	000000206900 02/01/05-80022-021 158.75
STREET ADDRESS CITY-ST-ZIP	02/01/05-80022-021 158.75
BILE	_
NAME STRIFT ADDRESS	
CITY-ST-ZIP	DO NOT WRITE
TITLE NAME	IN THIS SPACE
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME	
STREET ADDRESS	
CITY-ST-ZIP TITLE	
NAME	
STREET ADDRESS CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filling does not qualify for the exemption indicated on this report or supplemental about 15 true and accurate and that my signature stoff the corporation or the receiver of trustee empowered to execute this report as required by changed, or on an attachment with an address, with all other like empowered	n stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information hall have the same legal effect as if made under cells, that I are a first information
of the corporation or the receiver of trustee empowered to execute this report as required by changed, or on an attachment with an address, with all other like empowered	y Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

SIGNATURE: