

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000111092

Entity Name: AMARO & ROBERTSON CORP.

FILED
Apr 26, 2007
Secretary of State

Current Principal Place of Business:

P.O. BOX 520935
LONGWOOD, FL 32752 US

New Principal Place of Business:

418 HORIZON DR
WINTER SPRINGS, FL 32708 US

Current Mailing Address:

P.O. BOX 520935
LONGWOOD, FL 32752 US

New Mailing Address:

FEI Number: 61-1458501 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMARO, JANEY A
P.O. BOX 520935
LONGWOOD, FL 32752 US

Name and Address of New Registered Agent:

AMARO, JANEY A
418 HORIZON DR
WINTER SPRINGS, FL 32708 US

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.

SIGNATURE: JANEY AMARO

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROBERTSON, JANEY AMARO
Address: PO BOX 520935
City-St-Zip: LONGWOOD, FL 32752

Title: VD () Delete
Name: ROBERTSON, NELLY
Address: PO BOX 520935
City-St-Zip: LONGWOOD, FL 32752

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JANEY AMARO

P

04/26/2007

Electronic Signature of Signing Officer or Director

Date