2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000156544

Entity Name: ARZA INSTALLATIONS, INC.

FILED Mar 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2901 RIVERSIDE DR. 305

CORAL SPRINGS, FL 33065

Current Mailing Address: New Mailing Address:

2901 RIVERSIDE DR. 305

CORAL SPRINGS, FL 33065

FEI Number: 20-0519113 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ARBELAEZ, JUAN A

3684 N UNIVERSITY DRIVE

CORAL SPRINGS EL 22065 LIS

2901 RIVERSIDE DRIVE

CORAL SPRINGS, FL 33065 US 305 CORAL SPRINGS, FL 33065 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: JUAN ARBELAEZ 03/30/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: ARBELAEZ, JUAN A P
Address: 2901RIVERSIDE DR. Address: 2901RIVERSIDE DR. #305

 Address:
 2901RIVERSIDE DR.
 Address:
 2901RIVERSIDE DR. # 305

 City-St-Zip:
 CORAL SPRINGS, FL 33065
 City-St-Zip:
 CORAL SPRINGS, FL 33065

Title: VP () Delete Title: VP (X) Change () Addition
Name: ZAPATA, DAIRON D VP Name: CARDONA, PAULA A VP
Address: 3880 N J NJ NJ J PROJECT DRIVE

Address: 3680 N UNIVERSITY DRIVE Address: 2901RIVERSIDE DR. # 305 City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: CORAL SPRINGS, FL 33065

Title: ST () Delete Title: ST (X) Change () Addition

 Name:
 ZAPATA, DAIRON D ST
 Name:
 CARDONA, PAULA A ST

 Address:
 3680 N UNIVERSITY DRIVE
 Address:
 2901RIVERSIDE DR. # 305

 City-St-Zip:
 CORAL SPRINGS, FL 33065
 City-St-Zip:
 CORAL SPRINGS, FL 33065

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: JUAN ARBELAEZ P 03/30/2007