


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Aug 28, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P04000057321</b> 1. Entity Name WM ARTHUR CONSTRUCTION, INC.	
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Principal Place of Business 800 DOUGLAS ROAD 303 CORAL GABLES, FL 33134	Mailing Address 800 DOUGLAS ROAD 303 CORAL GABLES, FL 33134
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**DO NOT WRITE IN THIS SPACE**



08222007 No Chg-P CR2E034 (11/05)

4. FEI Number 06-1730006	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  ARTHUR, BRUCE A 800 DOUGLAS ROAD SUITE 303 CORAL GABLES, FL 33134	<b>DO NOT WRITE IN THIS SPACE</b>
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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 reinstating) DATE

<b>FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ARTHUR, WILLIAM F 1265 SOUTH ALHAMBRA CIRCLE, UNIT B CORAL GABLES, FL 33146
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ARTHUR, ALISON M 1265 SOUTH ALHAMBRA CIRCLE, UNIT B CORAL GABLES, FL 33146
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARTHUR, WILLIAM H 800 DOUGLAS ROAD, SUITE 303 CORAL GABLES, FL 33134
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 **22 AUG 07 (305) 753-5057**  
Date Daytime Phone #