

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 13, 2008  
Secretary of State**

DOCUMENT# P04000107217

Entity Name: ARCCO INC.

**Current Principal Place of Business:**

939 NW 35TH CT.  
FT. LAUDERDALE, FL 33309

**New Principal Place of Business:**

**Current Mailing Address:**

939 NW 35TH CT.  
FT. LAUDERDALE, FL 33309

**New Mailing Address:**

FEI Number: 20-1449181      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CLIFFORD, ROBERT J  
939 NW 35TH CT.  
FT. LAUDERDALE, FL 33309      US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CLIFFORD, ROBERT J  
Address: 939 NW 35TH CT.  
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: SD ( ) Delete  
Name: CLIFFORD, JEFF M  
Address: 939 NW 35TH CT.  
City-St-Zip: FT. LAUDERDALE, FL 33309

**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 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: ROBERT J CLIFFORD

PRES

05/13/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date