

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000112923

Entity Name: ARBA-QUAIL, INC.

FILED  
Apr 23, 2007  
Secretary of State

## Current Principal Place of Business:

15500 NEW BARN ROAD  
SUITE 207  
MIAMI LAKES, FL 33014

## Current Mailing Address:

15500 NEW BARN ROAD  
SUITE 207  
MIAMI LAKES, FL 33014

## New Principal Place of Business:

255 ALHAMBRA CIRCLE  
SUITE 500  
CORAL GABLES, FL 33134

## New Mailing Address:

255 ALHAMBRA CIRCLE  
SUITE 500  
CORAL GABLES, FL 33134

FEI Number: 20-2761290

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ARAGON REGISTERED AGENTS  
999 PONCE DE LEON BLVD. #715  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

ARAGON REGISTERED AGENTS, INC.  
255 ALHAMBRA CIRCLE  
SUITE 500  
CORAL GABLES, FL 33134 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: MAYRA FERNANDEZ

04/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ABADI, ABRAHAM  
Address: 15500 NEW BARN ROAD, SUITE 207  
City-St-Zip: MIAMI LAKES, FL 33014

Title: VP ( ) Delete  
Name: CARRILLO, GUILLERMO JR.  
Address: 15500 NEW BARN ROAD, SUITE 207  
City-St-Zip: MIAMI LAKES, FL 33014

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ABADI, ABRAHAM  
Address: 255 ALHAMBRA CIRCLE SUITE 500  
City-St-Zip: CORAL GABLES, FL 33134

Title: VP (X) Change ( ) Addition  
Name: CARRILLO, GUILLERMO JR.  
Address: 255 ALHAMBRA CIRCLE SUITE 500  
City-St-Zip: CORAL GABLES, FL 33134

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: ABRAHAM ABADI

P

04/23/2007

Electronic Signature of Signing Officer or Director

Date