

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000003141

Entity Name: AR & M ASSOCIATES, INC.

FILED  
Mar 30, 2011  
Secretary of State

**Current Principal Place of Business:**

495 S.E, 8TH ST., APT 237  
DEERFIELD BEACH, FL 33441 US

**New Principal Place of Business:**

6332 DUVAL DR  
MARGATE, FL 33063 US

**Current Mailing Address:**

495 S.E, 8TH ST., APT 237  
DEERFIELD BEACH, FL 33441 US

**New Mailing Address:**

6332 DUVAL DR  
MARGATE, FL 33063 US

FEI Number: 20-2118600

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

FUENTES, MIGUEL A PTS  
1243 SW 1ST TERR  
DEERFIELD BEACH, FL 33441 US

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

FUENTES, MIGUEL A PTS  
6332 DUVAL DR  
MARGATE, FL 33063 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

03/30/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PTS  
Name: FUENTES, MIGUEL A  
Address: 6332 DUVAL DR  
City-St-Zip: MARGATE, FL 33063 US

Title: V  
Name: SOSA, RAMON A  
Address: 6332 DUVAL DR  
City-St-Zip: MARGATE, FL 33063 US

I hereby 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 all other like empowered.

SIGNATURE: MIGUEL ANGEL FUENTES

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

03/30/2011

\_\_\_\_\_  
Date