

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 24, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000005339

1. Entity Name
ARUAL CORPORATION



Principal Place of Business
**17600 N.W. 9TH PLACE
MIAMI, FL 33169**

Mailing Address
**17600 N.W. 9TH PLACE
MIAMI, FL 33169**

DO NOT WRITE IN THIS SPACE



01202007 No Chg-P CR2E034 (11/05)

4. FEI Number
75-3209280

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**INIJE, CHARLES
16499 N.E. 19TH AVENUE #213A
NORTH MIAMI BCH, FL 33169**

**DO NOT WRITE
IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GIBSON, JAMES JR. 17600 N.W. 9TH PLACE MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GIBSON, VENEDDA 17600 N.W. 9TH PLACE MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SMITH, DAVRYE 17600 N.W. 9TH PLACE MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SMITH, NATALIE 17600 N.W. 9TH PLACE MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT GIBSON, JAMES III 17600 N.W. 9TH PLACE MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/26/07-80035-008 158.75

**DO NOT WRITE
IN THIS SPACE**

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:

J. Miller Gibson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/07

Date

305-621-2437

Daytime Phone #