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May 03, 2007 8:00 am
Secretary of State
05-03-2007 90065 049 ***150.00

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000004711

1. Entity Name
A & R CONTRACTORS SOLUTIONS, INC.

40104126

Principal Place of Business	Mailing Address
7652 NW 2ND TERRACE MIAMI, FL 33126	7652 NW 2ND TERRACE MIAMI, FL 33126

04302007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
14252 sw 152 terra		14252 SW 152 TERRA	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: MIAMI, FL 33177		City & State: MIAMI, FL 33177	
Zip	Country	Zip	Country

4. FEI Number 20-3616947 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MARTINEZ, ROBERTO P 7652 NW 2ND TERRACE MIAMI, FL 33126	Name Street Address (P.O. Box Number is Not Acceptable) 14252 SW 152 TERRA City MIAMI FL Zip Code 33177

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		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST MARTINEZ, ROBERTO P 7652 NW 2ND TERRACE MIAMI, FL 33126	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	14252 SW 152 TERRA MIAMI, FL 33177	☑ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTINEZ, ROBERTO P 7652 NW 2ND TERRACE MIAMI, FL 33126	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	14252 SW 152 TERRA MIAMI, FL 33177	☑ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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: PVP Roberto Perdomo Martinez 04/30/07 7865863084
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

04/30/2007 12:54 3052297119 LAZARA IVETT PAGE 01/02