


2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 20, 2007 8:00 am
Secretary of State

01-31-2007 90048 024 ***150.00

DOCUMENT # P06000012733																																															
1. Entity Name ARCANGLE MICHAEL, INC.																																															
Principal Place of Business 1237 WHITE OAK CIRCLE MELBOURNE FL 32934			Mailing Address 1237 WHITE OAK CIRCLE MELBOURNE FL 32934																																												
2. Principal Place of Business - No P.O. Box #			3. Mailing Address																																												
Suite, Apt. #, etc.			Suite, Apt. #, etc.																																												
City & State			City & State																																												
Zip	Country	Zip	Country	4. FEI Number: 84-1701097																																											
				Applied For <input type="checkbox"/> Not Applicable																																											
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																															
6. Name and Address of Current Registered Agent ZAKHARY, BASSEM 1237 WHITE OAK CIRCLE MELBOURNE FL 32934			7. Name and Address of New Registered Agent																																												
			Name																																												
			Street Address (P.O. Box Number is Not Acceptable)																																												
			City																																												
			State FL Zip Code																																												
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: <u><i>Bassem Zakhary</i></u> Bassem Zakhary 01/27/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																															
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																												
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3">10. OFFICERS AND DIRECTORS</th> <th colspan="3">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td>P/D ZAKHARY, BASSEM 1237 WHITE OAK CIRCLE MELBOURNE FL 32934</td> <td><input type="checkbox"/> Delete</td> <td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td colspan="2"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td>VP/D TAWADROSS, MEDHAT 3294 CLODBERRY PLACE MELBOURNE FL 32940</td> <td><input type="checkbox"/> Delete</td> <td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td colspan="2"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td>D ZAKHARY, BAHGAT 2651 12 SQUARE SW VERO BEACH FL 32968</td> <td><input type="checkbox"/> Delete</td> <td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td colspan="2"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td>S ALFRED, NANCY 1237 WHITE OAK CIRCLE MELBOURNE FL 32934</td> <td><input type="checkbox"/> Delete</td> <td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td colspan="2"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td></td> <td><input type="checkbox"/> Delete</td> <td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td colspan="2"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td></td> <td><input type="checkbox"/> Delete</td> <td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td colspan="2"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/D ZAKHARY, BASSEM 1237 WHITE OAK CIRCLE MELBOURNE FL 32934	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP/D TAWADROSS, MEDHAT 3294 CLODBERRY PLACE MELBOURNE FL 32940	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ZAKHARY, BAHGAT 2651 12 SQUARE SW VERO BEACH FL 32968	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY - ST - ZIP	S ALFRED, NANCY 1237 WHITE OAK CIRCLE MELBOURNE FL 32934	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: <u><i>Bassem Zakhary</i></u> Bassem Zakhary 01/27/07 (321)2530935 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																															