

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 02, 2007 8:00 am**  
**Secretary of State**

03-02-2007 90015 002 \*\*\*150.00

|  |                            |   |  |   |        |  |                            |                          |                |                        |  |             |                        |  |   |  |  |       |      |                    |  |  |   |                |  |  |             |  |  |
|--|----------------------------|---|--|---|--------|--|----------------------------|--------------------------|----------------|------------------------|--|-------------|------------------------|--|---|--|--|-------|------|--------------------|--|--|---|----------------|--|--|-------------|--|--|
| <b>DOCUMENT # P06000111575</b><br>1. Entity Name<br><b>3 AR SERVICES INC</b>   |                            |   |  |  |        |  |                            |                          |                |                        |  |             |                        |  |   |  |  |       |      |                    |  |  |   |                |  |  |             |  |  |
| Principal Place of Business<br><b>10375 SW 8 TERR<br/>MIAMI, FL 33174</b>  |                            |   | Mailing Address<br><b>10375 SW 8 TERR<br/>MIAMI, FL 33174</b>  |   |        |  |                            |                          |                |                        |  |             |                        |  |   |  |  |       |      |                    |  |  |   |                |  |  |             |  |  |
| 2. Principal Place of Business - No P.O. Box #<br><br>Suite, Apt. #, etc.  |                            | 3. Mailing Address<br><br>Suite, Apt. #, etc.   |  |   |        |  |                            |                          |                |                        |  |             |                        |  |   |  |  |       |      |                    |  |  |   |                |  |  |             |  |  |
| City & State<br><br>Zip      Country   |                            | City & State<br><br>Zip      Country  |  | 4. FEI Number<br><b>56-2635588</b>  |        |  |                            |                          |                |                        |  |             |                        |  |   |  |  |       |      |                    |  |  |   |                |  |  |             |  |  |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required  |                            |   |  | Applied For<br><input type="checkbox"/> Not Applicable                            |        |  |                            |                          |                |                        |  |             |                        |  |   |  |  |       |      |                    |  |  |   |                |  |  |             |  |  |
| 6. Name and Address of Current Registered Agent<br><br><b>DE GUTIERREZ, ANA R<br/>10375 SW 8 TERR<br/>MIAMI, FL 33174</b>  |                            |   | 7. Name and Address of New Registered Agent<br><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <b>FL</b> 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.<br><br>SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)      DATE _____  |                            |   |  |   |        |  |                            |                          |                |                        |  |             |                        |  |   |  |  |       |      |                    |  |  |   |                |  |  |             |  |  |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2007 Fee will be \$550.00</b>  |                            | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees |  |   |        |  |                            |                          |                |                        |  |             |                        |  |   |  |  |       |      |                    |  |  |   |                |  |  |             |  |  |
| 10. OFFICERS AND DIRECTORS<br><table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">NAME</td> <td style="width:20%; text-align: right;">Delete</td> </tr> <tr> <td></td> <td><b>DE GUTIERREZ, ANA R</b></td> <td><input type="checkbox"/></td> </tr> <tr> <td>STREET ADDRESS</td> <td><b>10375 SW 8 TERR</b></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td><b>MIAMI, FL 33174</b></td> <td></td> </tr> </table> |                            |   | TITLE  | NAME  | Delete |  | <b>DE GUTIERREZ, ANA R</b> | <input type="checkbox"/> | STREET ADDRESS | <b>10375 SW 8 TERR</b> |  | CITY-ST-ZIP | <b>MIAMI, FL 33174</b> |  | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11<br><table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">NAME</td> <td style="width:20%; text-align: right;">Change    Addition</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/>    <input type="checkbox"/></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> |  |  | TITLE | NAME | Change    Addition |  |  | <input type="checkbox"/> <input type="checkbox"/> | STREET ADDRESS |  |  | CITY-ST-ZIP |  |  |
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|  | <b>DE GUTIERREZ, ANA R</b> | <input type="checkbox"/>  |  |   |        |  |                            |                          |                |                        |  |             |                        |  |   |  |  |       |      |                    |  |  |   |                |  |  |             |  |  |
| STREET ADDRESS   | <b>10375 SW 8 TERR</b>     |   |  |   |        |  |                            |                          |                |                        |  |             |                        |  |   |  |  |       |      |                    |  |  |   |                |  |  |             |  |  |
| CITY-ST-ZIP  | <b>MIAMI, FL 33174</b>     |   |  |   |        |  |                            |                          |                |                        |  |             |                        |  |   |  |  |       |      |                    |  |  |   |                |  |  |             |  |  |
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| STREET ADDRESS   |                            |   |  |   |        |  |                            |                          |                |                        |  |             |                        |  |   |  |  |       |      |                    |  |  |   |                |  |  |             |  |  |
| CITY-ST-ZIP  |                            |   |  |   |        |  |                            |                          |                |                        |  |             |                        |  |   |  |  |       |      |                    |  |  |   |                |  |  |             |  |  |
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| STREET ADDRESS   |                            |   |  |   |        |  |                            |                          |                |                        |  |             |                        |  |   |  |  |       |      |                    |  |  |   |                |  |  |             |  |  |
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SIGNATURE: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**02-27-07**

Date

Daytime Phone #