2008 FOR PROFIT CORPORATION

FILED Jan 11, 2008 8:00 am **Secretary of State**

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DOCUMENT # P06000152304 01-11-2008 90068 040 ***150.00 A & R ENVIRONMENTAL SOLUTIONS, INC. 40001935 Principal Place of Business Mailing Address 243 OLD MILL CIR. 243 OLD MILL CIR. KISSIMMEE, FL 34746 KISSIMMEE, FL 34746 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite Apt. # etc. Suite, Apt. #, etc. 01092008 CR2E034 (12/06) City & State City & State 4. FEI Number Applied For Not Applicable Country Zip Country Zip \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CANTU, ROLANDO I Street Address (P.O. Box Number is Not Acceptable) 1602 COLUMBIA ARMS CIR **APT #108** KISSIMMEE, FL 34741 City 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 SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registured Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing **\$5.00** May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. **PSTD** TITLE Change ☐ Addition TITLE Delete CANTU, ROLANDO I NAME NAME 1602 COLUMBIA ARMS CIR APT #108 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP KISSIMMEE, FL 34741 TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CHY-SI-ZIP TITLE Delete TITLE Change ☐ Addition MAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.