

# **2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P08000105491

Entity Name: ARIS FINANCIAL SERVICES, INC.

**FILED**  
**Jan 28, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

19239 DALE MABRY HWY  
SUITE #109  
LUTZ, FL 33548

## **New Principal Place of Business:**

207 CRYSTAL GROVE BLVD  
LUTZ, FL 33548

## **Current Mailing Address:**

19239 DALE MABRY HWY  
SUITE #109  
LUTZ, FL 33548

## **New Mailing Address:**

207 CRYSTAL GROVE BLVD  
LUTZ, FL 33548

FEI Number: 26-3798437

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

ELLIS, DAVID M  
19239 DALE MABRY HWY  
SUITE # 109  
LUTZ, FL 33548 US

## **Name and Address of New Registered Agent:**

ELLIS, DAVID M  
207 CRYSTAL GROVE BLVD  
LUTZ, FL 33548 US

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.

SIGNATURE: DAVID ELLIS

01/28/2010

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: CEO  
Name: ELLIS, DAVID  
Address: 19239 DALE MABRY HWY #109  
City-St-Zip: LUTZ, FL 33548

Title: P  
Name: HATZAKIS, CHRISTOS  
Address: 19239 DALE MABRY HWY #109  
City-St-Zip: LUTZ, FL 33548

Title: VP  
Name: CARABELAS, DANNY  
Address: 19239 DALE MABRY HWY #109  
City-St-Zip: LUTZ, FL 33548

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DAVID ELLIS

MR.

01/28/2010

Electronic Signature of Signing Officer or Director

Date