

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000084964

Entity Name: ARM PRODUCTS, INC.

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

913 SO. EMERALD DRIVE  
KEY LARGO, FL 33037

**New Principal Place of Business:**

913 SO. EMERALD DRIVE  
KEY LARGO, FL 33037

**Current Mailing Address:**

P.O. BOX 372992  
KEY LARGO, FL 33037

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LOZANO, ALICIA O  
913 SO. EMERALD DRIVE  
KEY LARGO, FL 33037 US

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

LOZANO, ALICIA O  
913 SO. EMERALD DRIVE  
KEY LARGO, FL 33037 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

04/30/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: LOZANO, ALICIA O  
Address: 913 SO. EMERALD DRIVE  
City-St-Zip: KEY LARGO, FL 33037

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: ALICIA O. LOZANO

PRES

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date