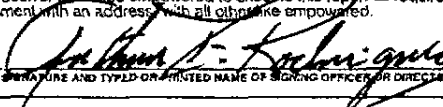


FILED
Jul 07, 2004 08:00 AM
Secretary of State

**2004 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P93000040608			
1. Entity Name AREC, INC.			
Principal Place of Business 1325 E 4 AVE HIALEAH, FL 33010		Mailing Address 1325 E 4 AVE HIALEAH, FL 33010	
DO NOT WRITE IN THIS SPACE		07022004 No Chg-P CR2E034 (10/03)	
		4. FEI Number 65-0419645	
		Applied For Not Applicable	
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			
RODRIGUEZ, ARTHUR F 1325 E. 4 AVENUE HIALEAH, FL 33010		DO NOT WRITE IN THIS SPACE	
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 _____ (NOTE: Registered Agent signature required when reconstituting)			
Signature, typed or printed name of registered agent and title if applicable. DATE			
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			
TITLE	PD	DO NOT WRITE IN THIS SPACE	
NAME	RODRIGUEZ, ARTHUR F		
STREET ADDRESS	1325 E. 4 AVENUE		
CITY- ST- ZIP	HIALEAH, FL 33010		
TITLE	SD		
NAME	RODRIGUEZ, ANGELINA L		
STREET ADDRESS	1325 E. 4 AVENUE	DO NOT WRITE IN THIS SPACE	
CITY- ST- ZIP	HIALEAH, FL 33010		
TITLE			
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
TITLE		DO NOT WRITE IN THIS SPACE	
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
TITLE			
NAME			
STREET ADDRESS		DO NOT WRITE IN THIS SPACE	
CITY- ST- ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: * 		07/02/2004	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

U00000164085
 07/07/04-80030-018 150.00