


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2007 08:00 AM
Secretary of State

DOCUMENT # P94000087458	
1. Entity Name ARCO COMMUNICATIONS NETWORK, CORP.	

Principal Place of Business 3905 SW 110 AVE. MIAMI, FL 33165	Mailing Address 3905 SW 110 AVE. MIAMI, FL 33165
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DO NOT WRITE IN THIS SPACE



01242007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0531390	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**DOMINGUEZ, JORGE
3905 SW 110 AVE.
MIAMI, FL 33165**

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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 reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE P	DOMINGUEZ, JORGE
NAME	10101 SW 125 AVE
STREET ADDRESS	MIAMI, FL 33186
CITY - ST - ZIP	
TITLE VP	DOMINGUEZ, EDUARDO
NAME	10940 SW 36 STREET
STREET ADDRESS	MIAMI, FL 33165
CITY - ST - ZIP	
TITLE S	DOMINGUEZ, DALIA
NAME	10940 SW 36 STREET
STREET ADDRESS	MIAMI, FL 33165
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

DO NOT WRITE
IN THIS SPACE

000000625589
02/14/07-80090-024 150.00

12. 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.

SIGNATURE: *Dalia Dominguez* **1/31/07 305-223-2561**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #