


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 07, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # P94000087458</b> 1. Entity Name ARCO COMMUNICATIONS NETWORK, CORP.	
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Principal Place of Business 3905 SW 110 AVE. MIAMI, FL 33165	Mailing Address 3905 SW 110 AVE. MIAMI, FL 33165
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01312008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

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

6. Name and Address of Current Registered Agent

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

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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 \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

U00000091908  
 04/16/08-80019-020 150.00

10. OFFICERS AND DIRECTORS

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

DO NOT WRITE IN THIS SPACE

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* **4/4/08** 305 233 2571  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #