FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address
490-1 BARNES BLVD

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000039180 (1)

ARNET PEREYRA, INC.

Principal Place of Business

3795 FLIGHT PARK DR

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

ROCKLEDGE FL 32955 ROCKLEDGE FL \$2955 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/17/1995 2. Principal Place of Business 21 3795 Fly Park Drive 2a, Mailing Address 4. FEI Number Applied For 3795 Fly Park Drive 59-3295403 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State
Rockledge City & State 6. Election Campaign Financing \$5.00 May Be FL Added to Fees Trust Fund Contribution Country Country 8. This corporation owes or has paid the current year Intangible 32955 25 USA USA Yes Yes Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PEREYRA, CARLOS 2091 SYKE CREEK DR Street Address (P.O. Box Number is Not Acceptable)
2091 Sykes Creek Drive 82 MERRITT ISLAND FL 32952 83 84 Zip Code orovisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered edit agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered litar with, and accept the obligations of, Section 607.0505, Florida Statutes. 11. Pursuant to th office or regit SIGNATURE s, typind or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DFLETE Change 1.1 TITLE TITLE PEREYRA, CARLOS NAME 1.2 NAME 2091 SYKES CREEK DR 1.3 STREET ADDRESS STREET ADDRESS MERRITT ISLAND FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Change Addition DELETE TITLE 2.1 TITLE ARNETTE, GREGO Arnetle, Greg 2.2 NAME NAME 1808 N INDIAN RIVER RD STREET ADDRESS 2.3 STREET ADDRESS **NEW SMYRNA BEACH FL** 2. 4 CITY - \$1 - ZIP CITY-ST-ZIP DELETE Change ■ Addition 3.1 TITLE TITLE NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - \$1 - ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP

6.4 CITY-S1-2IP

14. 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 annual 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 12 or Block 13 if phaged, or on an attachment with an address.

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

5.3 STREE1 ADDRESS

5.4 CITY - ST-ZIP

DELETE

DELETE

4/28/98

1407) 235-8005

Change

Change

Addition

Addition

FILED

May 05 1998 8:00am

Secretary of State