


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

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

DOCUMENT # P96000051328 1. Entity Name ARCO GLOBAL TRACKING SYSTEMS, INC.	
---	---

Principal Place of Business 3905 SW 110TH AVENUE MIAMI, FL 33165	Mailing Address 3905 SW 110TH AVENUE MIAMI, FL 33165
--	--

DO NOT WRITE IN THIS SPACE



01242007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0674102	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 110TH AVE
MIAMI, FL 33165**

**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: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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
---	---

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	DOMINGUEZ, JORGE
STREET ADDRESS	10101 SW 125TH AVE.
CITY-ST-ZIP	MIAMI, FL 33186
TITLE	VD
NAME	DOMINGUEZ, EDUARDO
STREET ADDRESS	10940 SW 36 ST.
CITY-ST-ZIP	MIAMI, FL 33165
TITLE	TSD
NAME	DOMINGUEZ, DALIA
STREET ADDRESS	10940 SW 36 ST
CITY-ST-ZIP	MIAMI, F, 33165
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

000000625614
02/14/07-80083-002 150.00

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 #