2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P96000058162

1. Entity Name
A. R. E. INTERNATIONAL CORP.

Principal Place of Business	Mailing Address
10790 SW 58TH TERR	PO BOX 832722
MIAMI, FL 33173 US	MIAMI, FL 33283-2722 US

DO NOT WRITE IN THIS SPACE

J4010000

04072004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
65-0682017	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ROSAS, RENE JR.
10790 SW 58 TERR
MIAMI, FL 33173

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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

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, 2004 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ROSAS, RENE JR.
STREET ADDRESS	10790 SW 58 TERR
CITY-ST-ZIP	MIAMI, FL
TITLE	D
NAME	ROSAS, ERICA
STREET ADDRESS	10790 SW 58 TERR
CITY-ST-ZIP	MIAMI, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

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: _Rene Rosas_   RENE ROSAS   04/34/04   305-279-7447

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #