

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000060853

FILED  
Jan 12, 2002 8:00 AM  
Secretary of State

Entity Name: ARROW GROUP, INC.

## Current Principal Place of Business:

321 N.W. 201 AVENUE  
PEMBROKE PINES, FL 33029

## New Principal Place of Business:

## Current Mailing Address:

321 N.W. 201 AVENUE  
PEMBROKE PINES, FL 33029

## New Mailing Address:

FEI Number: 65-0703705

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SOVERNS, RICKI D  
321 NW 201AVE  
PEMBROKE PINES, FL 33029

## Name and Address of New Registered Agent:

SOVERNS, RICKKI D  
321 NW 201AVE  
PEMBROKE PINES, FL 33029

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.

SIGNATURE: RICKKI D. SOVERNS

01/12/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: STD ( ) Delete  
Name: STARK, DAVID  
Address: 321 N.W. 201 AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VD ( ) Delete  
Name: WEST, CLINTON D  
Address: 321 N.W. 201 AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: PD ( ) Delete  
Name: SOVERNS, RICKKI D  
Address: 321 N.W. 201 AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33029

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID STARK

STD

01/12/2002

Electronic Signature of Signing Officer or Director

Date