


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004 08:00 AM
Secretary of State

DOCUMENT #P96000068797 1. Entity Name ARCAMO & ASSOCIATES, INC.	
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Principal Place of Business
4525 CALLAN BOULEVARD
DALY CITY, CA 94015

Mailing Address
4525 CALLAN BOULEVARD
DALY CITY, CA 94015



04192004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3398274 Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fees Required

6. Name and Address of Current Registered Agent

SWART, HARRY J
717 E OAK STREET
KISSIMMEE, FL 34744

**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, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

1000000126363
04/23/04-80031-001 150.00

10. OFFICERS AND DIRECTORS

TITLE	DPT
NAME	ARCAMO, JUNNE
STREET ADDRESS	4525 CALLAN BOULEVARD
CITY - ST - ZIP	DALY CITY, CA 94015
TITLE	DVPS
NAME	ARCAMO, MARIA E
STREET ADDRESS	4525 CALLAN BOULEVARD
CITY - ST - ZIP	DALY CITY, CA 94015
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
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 exemption stated in Section 119.07(3)(f), 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:

MARIA E. ARCAMO *M. E. Arcamo* 4-19-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 209-832-9249