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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000072266 (4)

A.R.L. FENCE, INC.

FILED
Apr 16 1998 8:00am
Secretary of State

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| Ĺ | | | | _ | | | | | |
|---|--|--|-------------------------------------|------------------------------|-------------|----------------------------|---|-----------------|-----------------|
| Principal Place of Business Mailing Address | | | | | | | | TIE LIBIA JIETE | HIND BIN 1681 |
| 3680 INVERR | ARY DRIVE | 3680 INV | 3680 INVERRARY DRIVE | | | | | | |
| APT 3H LAUDERHILL FL 33319 | | APT 3H LAUDERHILL FL 33319 | | | | DO NOT WRITE IN THIS SPACE | | | |
| LAUDENNILL | FL \$3319 | LAUDERN | ILL PL 33319 | | | | 3. Date Incorporated or Qualified | STAGE | |
| | | | | | | | 08/20/1997 | | |
| 2. Principal F | lace of Business | 2a. Mailing | Address | | | -1- | 4. FEI Number | T A | Applied For |
| 21 | | 26 | 26 | | | | 65-0776932 | h | Vot Applicable |
| Sulte, Apt. | #, etc. | Suite, | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | \$8.75 | Additional |
| 22 | | 27 | 27 | | | | 5. Certificate of Status Desired | Fee F | Perlupe |
| City & Stat | te | City & | City & State | | | | 6. Election Campaign Financing | \$5.00 |) Мау Ве |
| 23 | | 28 | | | | | Trust Fund Contribution | Added | to Fees |
| <u> </u> | Zip Country Zip | | Country | | | | 8. This corporation owes or has paid the current year Intangible | | |
| 24 | 25 9. Name and Address of Curr | [29] | | | | | Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent | | |
| - CC | NZALEZ, RAUL R | TOTAL PROGRAMMENT | 9011 | 81 | 7 | Name | IO. Hame and Address of Hen Hogisteles | Agont | |
| | 80 INVERRARY DRIVE | | | 82 | | | | | |
| | T 3H | | | | | Street Addres | ss (P.O. Box Number is Not Acceptable) | | |
| | UDERHILL FL 33319 | | | 83 | 3 | | | | |
|) | OPP. HIDE I E OOD ID | | | | 1 | | | | |
| | • | | | 84 | ' I ' | City | Fi | 85 Zip | Code |
| 11. Pursuant | to the provisions of Sections 607.0 | 502 and 607.1508 | , Florida Statutes | the abov | ve-r | named corpo | pration submits this statement for the purpose | of changing | its registered |
| Office or i | register ed agent, or both, in the Sta am fa miliar with, and accept the ob | ate of Florida, Such ligations of, Sectio | i change was au n 607.0505, Flor | thorized b ida Statute | oytl es. | ne corporatio | on's board of directors. I hereby accept the ap | pointment as | s registered |
| SIGNATURE | | | | , | | | | | |
| Old NATORE | Signature, typed or printed name of registered | | le (NOTE: | Registered Ac | gent | signature required | d when reinstating) OATE | | |
| 12. | | AND DIRLCTORS | | 13. | | | ADDITIONS/CHANGES TO OFFICERS AN | | |
| TITLE | PD DATE OF THE P | × | L_J DELETE | 1,1 TITLE | | | | L Change | ☐ Addition |
| NAME | GONZALEZ, RAUL R | ot) | | . 1,2 NAME | | | | | |
| STREET ADDRESS | 8680 INVERRARY DR, APT LAUDERHILL FL 33319 | งก | | 1.3 STREE | | | | | |
| CITY-ST-ZIP | VSD VSD | | DELETE | 1.4 CITY - | ST- | ZIP | | 0 | 14450 |
| TITLE | GONZALEZ, LILIAM | | L DECENE | 2.1 TITLE | | 1 | | ☐ Change | Addition |
| NAME | 3680 INVERRARY DR. APT | วน | | 2.2 NAME | | | | | |
| STREET ADDRESS | LAUDERHILL FL 33319 | эп | | 2.3 STREE | | | | | |
| CITY-ST-ZIP TITLE | TD | | DELETE | 2.4 CITY- 3.1 TITLE | ·SI - | ZIP | | Change | Addition |
| NAME | PEREZ, HUMBERTO | | C) OLLET | 3.1 HILE 3.2 NAME | | | | — onange | L ABOUDD! |
| STREET ADDRESS | 738 EAST 53 STREET | | | i | | aparee | | | |
| 4 | HIALEAH FL 33013 | | | 3.3 STREE | | - 1 | | | |
| CITY-ST-ZIP TITLE | DELETE | | 3.4. CITY-ST-ZIP 4.1 TITLE | | ZIP | | Change | Addition | |
| NAME | | | | 4.1 HACE | : | | | 3 1011g0 | |
| STREET ADDRESS | | | | 4.3 STREE | | DRESS | | | |
| CITY-ST-ZIP | | | | | | | | | |
| TITLE | □ DELETE | | DELETE | 4.4 CITY-ST-ZIP 5.1 TITLE | | | | Change | Addition |
| NAME | | | | 5.2 NAME | | | , | - • | _ |
| STREET ADDRESS | | | | 5.3 STREE | | IDRESS | | | |
| CITY-ST-ZIP | | | | 5.4 CITY- | | | · | | |
| TITLE | | | DELETE | 6.1 TITLE | | | | Change | Addition |
| NAME | | | | 6.2 NAME | | J | | | |
| STREET ADDRESS | | | | 6.3 STREE | T AD | IDRESS | | | |

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 or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the received or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an affecting it with an address.

SIGNATURE:

CITY-ST-ZIP

4/8/98 (954)730-2329