

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 03, 2003 8:00 am
Secretary of State

02-03-2003 90032 032 ***150.00

DOCUMENT # P97000106840

1. Entity Name
ARROW IMPORT EXPORT, INC.



Principal Place of Business
**11590 SEMINOLE BLVD. STE A11
LARGO FL 33778**

Mailing Address
**11590 SEMINOLE BLVD. STE A11
LARGO FL 33778**



2. Principal Place of Business
14285 SUNSHINE COURT
Suite, Apt. #, etc.

3. Mailing Address
14285 SUNSHINE COURT
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
LARGO, FL
Zip
33774

City & State
LARGO, FL
Zip
33774

4. FEI Number
59-3483465

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**BINES, SHIMON
11590 SEMINOLE BLVD, STE A11
LARGO FL 33778**

7. Name and Address of New Registered Agent

Name
JAY E KAUFFMAN
Street Address (P.O. Box Number is Not Acceptable)
6526 CENTRAL AVE
City
ST PETERSBURG FL Zip Code
33707

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

1/30/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSTD
BINES, SHIMON
11590 SEMINOLE BLVD, STE A11
LARGO FL 33778** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BINES, JACK
11590 SEMINOLE BLVD STE A11
LARGO FL 33778** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**AST
14285 SUNSHINE COURT
LARGO, FL 33774** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/03

Date

727-318-5050

Daytime Phone #

CR2E034 (10/02)