

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 04, 2005 8:00 am**  
**Secretary of State**

05-04-2005 90162 043 \*\*\*150.00

**DOCUMENT # P98000070752**

1. Entity Name  
**ARRO 600 CORPORATION**



Principal Place of Business

**5700 SW 97TH ST  
PINECREST, FL 33156**

Mailing Address

**5700 SW 97TH ST  
PINECREST, FL 33156**

**DO NOT WRITE IN THIS SPACE**



04302005 No Chg-P CR2E034 (10/03)

4. FEI Number  
**65-0917306**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**RODRIGUEZ, JOSE R  
275 FONTAINBLEAU BOULEVARD SUITE 135  
MIAMI, FL 33172**

**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 then: applicable)

(If CFS Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

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  
**D  
RODRIGUEZ, ARMANDO R  
5700 SW 97TH ST  
PINECREST, FL 33156**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 4/29/05