## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 23, 2006 08:00 AM Secretary of State

ANNOAL KEFOR				Sagratary of State		
DOCUMENT # P98000070752  1. Enity Name ARRO 600 CORPORATION			Secretary of State			
Principal Place 5700 SW 97 PINECREST, 1	TH ST	Mailing Address 5700 SW 97TH ST PINECREST, FL 33156	-	)	1 (1811 1820 1118 1138 <b>18</b> 11	ERNI IRBI ORAN TOBER BINE KITORI KI KETI
DO NOT WRITE IN THIS SPAC			CE	05032006 No Chg-P CR2E034 (11/05)  4. FEt Number		
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			
	named entity submits this statement for tions of registered agent	ne purpose of changing its register	ed affice or registe	red agent, or bo	th, in the State of Flori	ida. I am familiar with, and accept
SIGNATURE	ेश्वराज अस्त क्षांच्यां जा Questied अक्षेत्रकार अस्तानांच्यां असूनांच्यां जार्थ	Vib. 'approache (NOTE Registers	d Agent sepreture require	d whom theistateigs		DATE
FILE NOWIII FEE IS \$150,00 9. Election Campaign Finan  Due by September 6, 2006 Trust Fund Contribution				5.00 May Be In accordance with \$. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
TIG.  SISTEMATE STREET ADDRESS CHY ST ZIP  SISTEMATE STREET ADDRESS CHY ST ZIP  TITLE MAME STREET ADDRESS CHY ST ZIP  HITE MAME STREET ADDRESS CHY ST ZIP  HITE MAME STREET ADDRESS CHY ST ZIP  TITLE MAME MAME	OFFICERS AND DI D RODRIGUEZ, ARMANDO R 5700 SW 97TH ST PINCREST, FL 33156	RECTORS			05/23/06-1 05/23/06-1 NOT WI	80002-005 150.00
STREET ADDRESS CITY ST ZIP						

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 SPICER OR DIRECTOR.

Device Fig. 4.