2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

1. Entity Name ARBETTERS OF BIRD ROAD, INC. Principal Place of Business 8747 SW 40 STREET MIAMI FL 33165 US Mailing Address 9500 SOUTH DADELAND BLVD. #508 MIAMI FL 33156 US	
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2. Principal Place of Business 3. Mailing Address	
Suite, Apt. #, etc. Suite, Apt. #, etc MOORE CR2E034 (11/03)	
	plied For t Applicable
Zip Country Zip Country 5. Certificate of Status Desired Fee Required	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent	
Name Name	
RODRIGUEZ, RAFAEL E CPA 9500 SOUTH DADELAND BLVD. #508 MIAMI FL 33156 Street Address (P.O. Box Number is Not Acceptable)	·
City FL Zip Code)
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, the obligations of registered agent.	and accept
SIGNATURE Signature, typod or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstance) DATE	
Trust Find Contribution Added	May Be
Make Check Pavable to Florida Department of State	to Fees
Make Check Payable to Florida Department of State	
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Change	Addition Addition Addition 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 and typed or Printed Name OF SIGNING OFFICER OR DIRECTOR | Dayling Propary