

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2001 8:00 am
Secretary of State

05-22-2001 90736 001 ***370.00

DOCUMENT # P99000037910

1. Entity Name
ARNONE CONSULTING, INC.

Principal Place of Business 7667 W. SAMPLE ROAD SUITE 224 CORAL SPRINGS FL 33065	Mailing Address 7667 W. SAMPLE ROAD SUITE 224 CORAL SPRINGS FL 33065
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0920133	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
H.A. INCORPORATED
308 NW 101 TERRACE
CORAL SPRINGS FL 33071

7. Name and Address of New Registered Agent
 Name: **Gregory L. Arnone**
 Street Address (P.O. Box Number is Not Acceptable): **7667 W. Sample Rd Ste 224**
 City: **Coral Springs** FL Zip Code: **33065**

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.
 SIGNATURE: *[Signature]* **G.L. Arnone pres** DATE: **4/18/01**

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State
 10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARONE, GREGORY L 7667 W. SAMPLE ROAD CORAL SPRINGS FL 33065	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARONE, PAMELA S 7667 W. SAMPLE ROAD CORAL SPRINGS FL 33065	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **G.L. Arnone pres** DATE: **4/18/01** (954) 9-385-2885

CR2E034 (10/00)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : Arnone Consulting Inc.

2. The mailing address of the corporation : 7667 W. Sample Rd, Ste 224
Coral Springs, FL 33065

3. Date of incorporation/qualification: 4/27/99 Document number: P99000037910

~~4. The name and address of the current registered agent and office:~~
Gerald Heller, H.A. Incorporated
308 NW 101 Terrace
Coral Springs, FL 33071

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):
(P. O. Box Not Acceptable)
Gregory L. Arnone
7667 W. Sample Rd, Ste 224
Coral Springs, FL 33065

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

G.L. Arnone G
(Signature of an officer, chairman or vice chairman of the board)

4/18/01
(Date)

G.L. Arnone
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

G.L. Arnone
(Signature of Registered Agent)

4/18/01
(Date)

If signing on behalf of an entity:
G.L. Arnone
(Typed or Printed Name)

Pres.
(Capacity)

*** FILING FEE: \$35.00 ***

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Arnone Building and Design, Inc.

2. The mailing address of the corporation: 7667 W. Sample Rd, Ste 224
Coral Springs, FL 33065-4718

3. Date of incorporation/qualification: 3/20/87 Document number: 163774

4. The name and address of the current registered agent and office:

Bruce I Kravitz
11440 Okeechobee Blvd., Ste 219
Royal Palm Beach, FL 33411

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):
(P. O. Box Not Acceptable)

Gregory L. Arnone
7667 W. Sample Rd, Ste 224
Coral Springs, FL 33065-4718

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

X [Signature] G.L. Arnone
(Signature of an officer, chairman or vice chairman of the board)

4/10/01
(Date)

G.L. Arnone Pres.
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

X [Signature]
(Signature of Registered Agent)

4/10/01
(Date)

If signing on behalf of an entity:

G.L. Arnone pres.
(Typed or Printed Name) (Capacity)

*** FILING FEE: \$35.00 ***