2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # **P99000045975** Jul 20, 2000 8:00 am 1. Entity Name **Secrétary of State** ARTA-2000, INC. 07-20-2000 90020 009 ***150.00 Principal Place of Business Mailing Address 1275 SOUTHWEST 46TH AVENUE 1275 SOUTHWEST 46TH AVENUE **SUITE 2216 SUITE 2216** POMPANO BEACH FL 33069 POMPANO BEACH FL 33069 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 1050922559 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Islakanika SPIEGEL & UTRERA. P.A.— Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE CORAL GABLES FL 33134 2216 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 d title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Change ☐ Addition TITLE ☐ Defete TITLE TSIALIAMANIS, PETER NAME NAME 1275 SOUTHWEST 46TH AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 33069 ☐ Addition ☐ Delete TITLE Change TSIAKANIKAS, DIMITRIOS NAME STREET ADDRESS 1275 SOUTHWEST 46TH AVENUE STREET ADDRESS POMPANO BEACH FL 33069 CITY-ST-ZIP CITY-ST-ZIP ■ Addition TITLE TITLE ☐ Change Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition ☐ Delete TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling 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 in address with all other like empowered.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

☐ Delete

SIGNATURE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

7/14/0

Date

Daytime Phone #

☐ Change

☐ Addition

P99000045975 (Attachnut) ADOLENESS

ARTA-2000, INC. 1275 S.W. 46TH AVENUE SUITE 2216 POMPANO BEACH, FLORIDA 33069

State of Florida Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 July 14, 2000

RE: UNIFORM BUSINESS REPORT ARTA-2000, INC DOCUMENT # P99000045975

Dear Sir/Madam:

Please be advised that we did not receive the pre printed/original Uniform Business Report Packet for 2000 for the above-mentioned corporation.

Enclosed please find a check in the amount of \$150.00 for the original fee with the signed report.

Thank you for your cooperation in this matter.

Sincerely,

Dimitrios Tsiakanikas

Vice President