


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2008 08:00 A
Secretary of State

DOCUMENT # S32889
 1. Entity Name
ARSENIO GARCIA BUILDING ACCOUNT CORPORATION



Principal Place of Business Mailing Address
1952 W FLAGLER ST **1952 W FLAGLER ST**
MIAMI, FL 33135 **MIAMI, FL 33135**

DO NOT WRITE IN THIS SPACE



03192008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
65-0357007 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
GARCIA, ARSENIO
1952 W FLAGLER ST
MIAMI, FL 33135

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

000000868256
 04/09/08-80001-022 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GARCIA, ARSENIO 1952 W FLAGLER ST MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GARCIA, FELIX RAMON 1952 W FLAGLER ST MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GARCIA, JUAN F. 1952 W FLAGLER ST MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby 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:  **3/19/08** **205-649-1933**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #