


2005 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 28
Sec

DOCUMENT # S34043		
1. Entity Name CARLOS J. ARBOLEYA, JR., P.A.		
Principal Place of Business 2550 SOUTH DIXIE HIGHWAY COCONUT GROVE, FL 33133 US	Mailing Address 2550 SOUTH DIXIE HIGHWAY COCONUT GROVE, FL 33133 US	
DO NOT WRITE IN THIS SPACE		



02232005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0258310	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent ARBOLEYA, CARLOS J., JR. 2550 SOUTH DIXIE HIGHWAY COCONUT GROVE, FL 33133		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ARBOLEYA, CARLOS J., JR. 2550 SOUTH DIXIE HIGHWAY COCONUT GROVE, FL
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02/28/05-80018-020 150.00

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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 reporter 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	ARBOLEYA Date 305-886-0076 Daytime Phone #