2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S62768

Title:

Name:

Address:

City-St-Zip:

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ROBLES, JESUS,

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2555 COLLINS AVE APT # 500

MIAMI BEACH, FL 33140

Entity Name: ARCA DEVELOPMENT, INC.

FILED Feb 08, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 15476 NW 77TH CT., SUITE 338 MIAMI LAKES, FL 33016 **Current Mailing Address: New Mailing Address:** 15476 NW 77TH CT., SUITE 338 MIAMI LAKES, FL 33016 FEI Number: 65-0271254 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MARQUEZ, JOSE M. E 782 NW LÉJEUNE ROAD SUITE 548 MIAMI, FL 33126 US 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition GUERRA, ARMANDO J., Name: Name: 9745 JOURNEY'S END RD Address: Address: City-St-Zip: CORAL GABLES, FL 33156 City-St-Zip: Title: Title: () Delete () Change () Addition Name: HERRAN, AGUSTIN. Name: 15476 NW 77 CT #338 Address: Address: MIAMI LAKES, FL 33016 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition JAIME, CAMILO M., Name: Name: 13000 OLD CUTLER RD Address: Address: City-St-Zip: CORAL GABLES, FL 33156 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: CAMILO JAIME P 02/08/2007

() Change () Addition