


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 91009 001 ***150.00


DOCUMENT # S69447

1. Entity Name
THE ARIEN PROPERTY, INC.



Principal Place of Business 9130 S DADELAND BLVD. STE 1607 MIAMI, FL 33156-7851 US	Mailing Address 9130 S DADELAND BLVD. STE 1607 MIAMI, FL 33156-7851 US
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country



01102004 Chg-P CR2E034 (10/03)

4. FEI Number 65-0275711	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

AMOROS, ALBERTO
 9130 S DADELAND BLVD.
 STE 1607
 MIAMI, FL 33156

7. Name and Address of New Registered Agent

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City _____ **FL** Zip Code _____

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, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	DCP	<input type="checkbox"/> Delete
NAME	NEIRA, CESAR	
STREET ADDRESS	MONTEFLOR 670-201	
CITY-ST-ZIP	LIMA, PERU,	
TITLE	DVT	<input type="checkbox"/> Delete
NAME	NEIRA, TERESA UYESU D	
STREET ADDRESS	MONTEFLOR 670-201	
CITY-ST-ZIP	LIMA, PERU,	
TITLE	S	<input type="checkbox"/> Delete
NAME	AMOROS, ALBERTO	
STREET ADDRESS	9801 SW 73 COURT	
CITY-ST-ZIP	MIAMI, FL 33156	
TITLE	D	<input type="checkbox"/> Delete
NAME	NEIRA, UYESU ENRIQUE	
STREET ADDRESS	AVE. JAVIER PRADO 1680-1501	
CITY-ST-ZIP	LIMA, PE	
TITLE	D	<input type="checkbox"/> Delete
NAME	NEIRA, UYESU CARLOS	
STREET ADDRESS	MONTEFLOR 670, APTO 201	
CITY-ST-ZIP	LIMA PERU,	
TITLE	D	<input type="checkbox"/> Delete
NAME	NEIRA UYESU, TERESA	
STREET ADDRESS	VELSACO ASTETE 783, APTO 201	
CITY-ST-ZIP	LIMA, PERU,	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 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: *[Signature]* **4.19.04 305 670 7858**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #