

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000000006

**Entity Name:** AARO RETAIL SYSTEMS, INC.

**Current Principal Place of Business:**

5020 BRIDGE PORT DR.  
SAFETY HARBOR, FL 34695

**Current Mailing Address:**

P. O. BOX 853  
SAFETY HARBOR, FL 34695

**FEI Number:** 59-3314933

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

LAMONICA, THOMAS P  
5020BRIDGEPORT DR  
SAFETY HARBOR, FL 34695 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

**Officer/Director Detail :**

Title            D  
Name            LAMONICA, THOMAS P  
Address        2008 DOVER COURT  
City-State-Zip: OLDSMAR FL 34677

*I hereby 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 all other like empowered.*

**SIGNATURE:** THOMAS LAMONICA

GM

04/22/2015

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date