

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000096123

FILED  
Apr 25, 2011  
Secretary of State

Entity Name: MY BUSINESS WAREHOUSE, INC

**Current Principal Place of Business:**

602 CAMINO REAL  
HOWEY IN THE HILLS, FL 34737

**New Principal Place of Business:**

**Current Mailing Address:**

602 CAMINO REAL  
HOWEY IN THE HILLS, FL 34737

**New Mailing Address:**

FEI Number: 16-1601933

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GRIFFING, JOEL B  
602 CAMINO REAL  
HOWEY IN THE HILLS, FL 34737 US

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

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GRIFFING FAMILY LIMITED PARTNERSHIP  
Address: 602 CAMINO REAL  
City-St-Zip: HOWEY IN THE HILLS, FL 34737

Title: VP  
Name: ARK SOLUTIONS GROUP, INC  
Address: 602 CAMINO REAL  
City-St-Zip: HOWEY IN THE HILLS, FL 34737

Title: S  
Name: KOUWE, RICHARD  
Address: 602 CAMINO REAL  
City-St-Zip: HOWEY IN THE HILLS, FL 34737

Title: T  
Name: GRIFFING FAMILY LIMITED PARTNERSHIP  
Address: 602 CAMINO REAL  
City-St-Zip: HOWEY IN THE HILLS, FL 34737

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: JOEL GRIFFING

P

04/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date