

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90183 047 ***150.00

DOCUMENT # S37981

1. Entity Name
ARITHMETECH, INC.



Principal Place of Business
**5005 DORMAN RD.
 LAKELAND, FL 33813**

Mailing Address
**5005 DORMAN RD.
 LAKELAND, FL 33813**

94069654



2. Principal Place of Business

**214 HILLCREST STREET
 Suite, Apt. #, etc.
 SUITE #1**

3. Mailing Address

**518 GRAND CAYMAN CIRCLE
 Suite, Apt. #, etc.**

04222004 Chg-P CR2E034 (10/03)

City & State
LAKELAND, FL

City & State
LAKELAND, FL

4. FEI Number
59-3052366

Applied For
 Not Applicable

Zip Country
33813 USA

Zip Country
33803 USA

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BAILEY, DOUGLAS
 5005 DORMAN RD.
 LAKELAND, FL 33813**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
214 HILLCREST STREET

SUITE #1

City **LAKELAND**

FL

Zip Code
33813

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

[Signature]

DOUGLAS V. BAILEY

4/26/04

**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 **D** Delete
 NAME **BAILEY, DOUGLAS V.**
 STREET ADDRESS **5005 DORMAN RD.**
 CITY-ST-ZIP **LAKELAND, FL 338132574**

TITLE **D** Delete
 NAME **BAILEY, DIANE B**
 STREET ADDRESS **5005 DORMAN RD**
 CITY-ST-ZIP **LAKELAND, FL 338132574**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Change Addition
 NAME
 STREET ADDRESS **518 GRAND CAYMAN CIRCLE**
 CITY-ST-ZIP **LAKELAND, FL 33803 33803**

TITLE Change Addition
 NAME
 STREET ADDRESS **518 GRAND CAYMAN CIRCLE**
 CITY-ST-ZIP **LAKELAND, FL 33803**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change 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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOUGLAS V. BAILEY **4/26/04**

(863) 683-1040