

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000087484

**Entity Name:** ARK MARKETING SERVICES INC.**Current Principal Place of Business:**7345 GREENBRIAR PKWY.  
ORLANDO, FL 32819**Current Mailing Address:**7345 GREENBRIAR PKWY.  
ORLANDO, FL 32819 US**FEI Number:** 85-4142179**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CLAY ALLEN, NOAH  
110 S. MARJORIE CT.  
MERRITT ISLAND, FL 32952 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 P                     |
| Name            | CLAY ALLEN, NOAH        |
| Address         | 110 S. MARJORIE CT.     |
| City-State-Zip: | MERRITT ISLAND FL 32952 |

|                 |                         |
|-----------------|-------------------------|
| Title           | VP                      |
| Name            | CLAY ALLEN, NOAH        |
| Address         | 110 S. MARJORIE CT.     |
| City-State-Zip: | MERRITT ISLAND FL 32952 |

|                 |                         |
|-----------------|-------------------------|
| Title           | S T                     |
| Name            | CLAY ALLEN, NOAH        |
| Address         | 110 S. MARJORIE CT.     |
| City-State-Zip: | MERRITT ISLAND FL 32952 |

*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:** NOAH CLAY ALLEN

PRESIDENT

03/15/2021

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