

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000061804

Entity Name: ARKLAND LLC

FILED
Jun 19, 2006
Secretary of State

Current Principal Place of Business:

FLAT 34, BLOCK B, CHRISTINE COMPLEX
AMATHOUNTAS AVE., LIMASSOL 4531
CYPRUS,

New Principal Place of Business:

FLAT 34, BLOCK B, CHRISTINE COMPLEX
AMATHOUNTAS AVE.
LIMASSOL, NA 4531 CY

Current Mailing Address:

FLAT 34, BLOCK B, CHRISTINE COMPLEX
AMATHOUNTAS AVE., LIMASSOL 4531
CYPRUS,

New Mailing Address:

FLAT 34, BLOCK B, CHRISTINE COMPLEX
AMATHOUNTAS AVE.
LIMASSOL, NA 4531 CY

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

ARD, SHIRLEY & HARTMAN, P.A.
207 WEST PARK AVE., SUITE B
TALLAHASSEE, FL 32301 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HOGAN, SEAN
Address: 34-B, CHRISTINE COMPLEX,AMATHOUNTAS AVE.
City-St-Zip: LIMASSOL, 4531, CYPRUS,

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HOGAN, SEAN
Address: 34-B, CHRISTINE COMPLEX,AMATHOUNTAS AVE.
City-St-Zip: LIMASSOL, NA 4531 CY

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SEAN HOGAN

MGR

06/19/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date