


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 11, 2007 08:00 A
Secretary of State

DOCUMENT # P01000016926 1. Entity Name ARKOUTH, INC.	
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Principal Place of Business 356 NW HOGAN ST PORT SAINT LUCIE, FL 34983	Mailing Address PO BOX 881311 PORT SAINT LUCIE, FL 34988
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DO NOT WRITE IN THIS SPACE

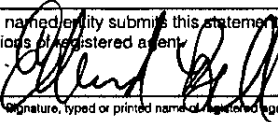


04072007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1077843	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BELL, EDWARD 356 NW HOGAN ST PORT SAINT LUCIE, FL 34983
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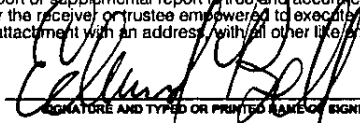
DO NOT WRITE IN THIS SPACE

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:  DATE: 4/7/07
<small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD BELL, EDWARD 356 NW HOGAN ST PORT SAINT LUCIE, FL 34983
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U000000701447 04/20/07-80059-003 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 life empowered.
SIGNATURE:  DATE: 4/7/07 DAYTIME PHONE #: 772-519-1495
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>