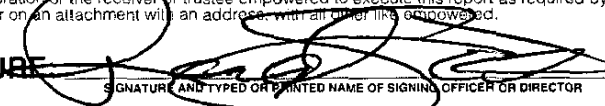


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004 8:00 am
Secretary of State

04-22-2004 90030 034 ***150.00

DOCUMENT # P01000061291					
1. Entity Name ARDUS DESIGN GROUP, INC.					
Principal Place of Business 4231 WALNUT BEND STE 2C JACKSONVILLE, FL 32257			Mailing Address PO BOX 16952 JACKSONVILLE, FL 32245-6952		
2. Principal Place of Business 4231 Walnut Bend Suite, Apt. #, etc. Suite 2 City & State Jacksonville, FL Zip 32257 Country U.S.			3. Mailing Address Suite, Apt. #, etc. City & State City & State Zip Country		
4. FEI Number 59-3729384			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent SCOTT, RAYMOND D 4231 WALNUT BEND STE 2C JACKSONVILLE, FL 32257			7. Name and Address of New Registered Agent Name Scott, Raymond D Street Address (P.O. Box Number is Not Acceptable) 4231 Walnut Bend Suite 2 City Jacksonville FL Zip Code 32257		
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 4-19-04 <small>Signature of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPVS SCOTT, RAYMOND D 10275 OLD ST AUGUSTINE RD APT 706 JACKSONVILLE, FL 32257	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAVIS Scott, Raymond D 2915 Marble Rd. Jacksonville, FL 32211	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SCOTT, RAYMOND D 10275 OLD ST AUGUSTINE RD APT 706 JACKSONVILLE, FL 32257	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Scott, Raymond D 2915 Marble Rd. Jacksonville, FL 32211	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE 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 lines approved.					
SIGNATURE 			Date 4-19-04 Daytime Phone # 904-262-4003		