

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000113845

FILED  
May 01, 2004  
Secretary of State

Entity Name: ARACHNIDS CORPORATION OF AMERICA

## Current Principal Place of Business:

2045 HYDE PARK STREET  
SUITE 1  
SARASOTA, FL 34239

## Current Mailing Address:

P.O. BOX 272  
LAUREL, FL 34272

## New Principal Place of Business:

2730 WHITE SANDS DR.  
SUITE 2-A  
SARASOTA, FL 34231 US

## New Mailing Address:

P.O. BOX 272  
LAUREL, FL 34272 US

FEI Number: 35-2158316

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FLORIDA INCORPORATOR  
2045 HYDE PARK STREET  
SUITE 1  
SARASOTA, FL 34239

## Name and Address of New Registered Agent:

FLORIDA INCORPORATOR  
2730 WHITE SANDS DR.  
SUITE 3-A  
SARASOTA, FL 34231 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:

05/01/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: DEBARROS, RAUL  
Address: P.O. BOX 271  
City-St-Zip: LAUREL, FL 34272

Title: D ( ) Delete  
Name: DEBARROS, GENOVEVA  
Address: P.O. BOX 271  
City-St-Zip: LAUREL, FL 34272

Title: DP ( ) Delete  
Name: DEBARROS, REGIS  
Address: P.O. BOX 271  
City-St-Zip: LAUREL, FL 34272

Title: DV (X) Delete  
Name: ANGELDONIS, VICTORIA  
Address: P.O. BOX 271  
City-St-Zip: LAUREL, FL 34272

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: DEBARROS, RAUL  
Address: P.O. BOX 271  
City-St-Zip: LAUREL, FL 34272 US

Title: D (X) Change ( ) Addition  
Name: DEBARROS, GENOVEVA  
Address: P.O. BOX 271  
City-St-Zip: LAUREL, FL 34272 US

Title: DP (X) Change ( ) Addition  
Name: DEBARROS, REGIS  
Address: P.O. BOX 271  
City-St-Zip: LAUREL, FL 34272 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: REGIS BARROS

P

05/01/2004

Electronic Signature of Signing Officer or Director

Date