

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000060336

Entity Name: ARKITECHS INC.

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

491 BIRCHWOOD WAY
WESTON, FL 33326

New Principal Place of Business:

318 INDIAN TRACE
SUITE 649
WESTON, FL 33326

Current Mailing Address:

491 BIRCHWOOD WAY
WESTON, FL 33326

New Mailing Address:

318 INDIAN TRACE
SUITE 649
WESTON, FL 33326

FEI Number: 41-2044204

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALL, RICHARD
491 BIRCHWOOD WAY
WESTON, FL 33326 US

Name and Address of New Registered Agent:

WALL, RICHARD
318 INDIAN TRACE
SUITE 649
WESTON, FL 33326 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: RICHARD WALL

04/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WALL, RICHARD
Address: 491 BIRCHWOOD WAY
City-St-Zip: WESTON, FL 33326

Title: D () Delete
Name: LEE, AVALON
Address: 17067 NW 23RD STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D () Delete
Name: WOODROFFE, NOEL
Address: 318 INDIAN TRACE, SUITE 649
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WALL, RICHARD
Address: 318 INDIAN TRACE, SUITE 649
City-St-Zip: WESTON, FL 33326

Title: D (X) Change () Addition
Name: LEE, AVALON
Address: 318 INDIAN TRACE, SUITE 649
City-St-Zip: WESTON, FL 33326

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: AVALON LEE

D

04/15/2009

Electronic Signature of Signing Officer or Director

Date