2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000036535

Entity Name: ARICON GROUP CORPORATION

FILED Mar 18, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1539 DALE MABRY HIGHWAY

102 LUTZ, FL 33548

Current Mailing Address:

New Mailing Address:

SELLERS, WILLIAM

1539 DALE MABRY HIGHWAY

LUTZ, FL 33548

FEI Number: 20-4475819 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PYUN, JOO H 35001 MEADOW REACH DR ZEPHYRHILLS, FL 33541

2943 BILLÍNGHAM DR.

LAND O LAKES, FL 34639 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: WILLIAM SELLERS 03/18/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

KIM, YOUNG C SELLERS, WILLIAM Name: Name: 17425 LAWN ORCHID LOOP 2943 BILLINGHAM DR. Address: Address: City-St-Zip: LAND O LAKES, FL 34638 City-St-Zip: LAND O LAKES, FL 34639

VΡ Title: Title: () Delete () Change () Addition

Name: SELLERS, WL ROCKY Name: 2943 BILLINGHAM DR Address: Address: LAND O LAKES, FL 34639 City-St-Zip: City-St-Zip:

Title: Title: CAO () Delete CAO (X) Change () Addition

PYUN, JOO H Name: SELLERS, WILLIAM Name: 35001 MEADOW REACH DR 2943 BILLINGHAM DR. Address: Address: City-St-Zip: ZEPHYRHILLS, FL 33541 City-St-Zip: LAND O LAKES, FL 34639

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.

Ρ SIGNATURE: WILLIAM SELLERS 03/18/2009