

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 28, 2008 08:00 A
Secretary of State

DOCUMENT # P06000052143

1. Entry Name
ARKADIA, INC.



Principal Place of Business
3534 HERON ISLAND DRIVE
NEW PORT RICHEY, FL 34655

Mailing Address
3534 HERON ISLAND DRIVE
NEW PORT RICHEY, FL 34655



02062008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 71-1002250	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

KARYS, MICHAEL C
3534 HERON ISLAND DRIVE
NEW PORT RICHEY, FL 34655

**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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

000000872070
04/10/08-80023-014 150.00

10. OFFICERS AND DIRECTORS

TITLE	PVPD
NAME	KARYS, MICHAEL C
STREET ADDRESS	3534 HERON ISLAND DRIVE
CITY-ST-ZIP	NEW PORT RICHEY, FL 34655

TITLE	STD
NAME	KARYS, MARIA
STREET ADDRESS	3534 HERON ISLAND DRIVE
CITY-ST-ZIP	NEW PORT RICHEY, FL 34655

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 like empowered.

SIGNATURE: Michael Christ Karys MICHAEL KARYS 3 26 2008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #