

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000052143

Entity Name: ARKADIA, INC.

FILED
Mar 11, 2009
Secretary of State

Current Principal Place of Business:

3534 HERON ISLAND DRIVE
NEW PORT RICHEY, FL 34655

New Principal Place of Business:

6103 GEORGIA AVE
NEW PORT RICHEY, FL 34653

Current Mailing Address:

3534 HERON ISLAND DRIVE
NEW PORT RICHEY, FL 34655

New Mailing Address:

6103 GEORGIA AVE
NEW PORT RICHEY, FL 34653

FEI Number: 71-1002250

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

KARYS, MICHAEL C
6103 GEORGIA AVE
NEW PORT RICHEY, FL 34653 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:

03/11/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVPD () Delete
Name: KARYS, MICHAEL C
Address: 3534 HERON ISLAND DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: STD () Delete
Name: KARYS, MARIA
Address: 3534 HERON ISLAND DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34655

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVPD (X) Change () Addition
Name: KARYS, MICHAEL C
Address: 6103 GEORGIA AVE
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: STD (X) Change () Addition
Name: KARYS, MARIA
Address: 6103 GEORGIA AVE
City-St-Zip: NEW PORT RICHEY, FL 34653

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: MICHAEL KARYS

PVPD

03/11/2009

Electronic Signature of Signing Officer or Director

Date