2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# P06000099581

Entity Name: ARKONCEPT DESIGN CONSULTING GROUP, INC.

Current Principal Place of Business:

247 S.E. MIZNER BLVD.
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

247 S.E. MIZNER BLVD.
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 20-5334398 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SILVA, ANDRES
2100 CORPORATE DR.
BOYNTON BEACH, FL 33426 US

Name and Address of New Registered Agent:

SILVA, ANDRES
247 SE MIZNER BLVD
BOCA RATON, FL 33432 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: ANDRES SILVA 04/29/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SILVA, ANDRES
Address: 2100 CORPORATE DR.
City-St-Zip: BOYNTON BEACH, FL 33426

Title: VP (X) Delete
Name: DE MIER, RITA
Address: 19213 SABAL LAKE DRIVE
City-St-Zip: BOCA RATON, FL 33434

Title: S ( ) Delete
Name: SWANSON, KATHERINE E
Address: 4735 PALM BROOKE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33417

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SILVA, ANDRES
Address: 247 SE MIZNER BLVD
City-St-Zip: BOCA RATON, FL 33432

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

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: ANDRES SILVA D 04/29/2009
Electronic Signature of Signing Officer or Director Date