2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000096408

FILED Jun 29, 2009 Secretary of State

Entity Na	me: ARCINN	IOVATIONS, INC.			
Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
28317 PIK HILLIARD,	E ROAD , FL 32046		37545 WEST FIRST 8 HILLIARD, FL 32046	37545 WEST FIRST STREET HILLIARD, FL 32046	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
28317 PIK HILLIARD,	E ROAD , FL 32046		37545 WEST FIRST S HILLIARD, FL 32046	STREET	
FEI Number	: 26-3362322	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
233 EAST 720 BLAC JACKSON The above	e of Florida.	G 202 US	ourpose of changing its registere	d office or registered agent, or both,	
		nic Signature of Registered Ag	ent	Date	
Election Car		93(2)(b), F.S., the corporation did no og Trust Fund Contribution (). CTORS:	·	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (ENGELMANN, 28317 PIKE R HILLIARD, FL	OAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (ENGELMANN, 28317 PIKE R HILLIARD, FL	OAD	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: SHANNON ENGELMANN 06/29/2009 D