

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000069389

FILED
Apr 29, 2007
Secretary of State

Entity Name: ARCUS, INC.

Current Principal Place of Business:

301 S NEW YORK AVE
SUITE 200
WINTER PARK, FL 32789 US

New Principal Place of Business:

Current Mailing Address:

301 S NEW YORK AVE
SUITE 200
WINTER PARK, FL 32789 US

New Mailing Address:

FEI Number: 58-3265465 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLD-THYSSEN, INC.
301S NEW YORK AVE
SUITE 200
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: THYSSEN, REBECCA
Address: 301 S NEW YORK AVE SUITE 200
City-St-Zip: WINTER PARK, FL 32789 US

Title: PD () Delete
Name: THYSSEN, PETER
Address: LOEWENGRUBE 18
City-St-Zip: MUENCHEN, GERMANY, D80 333

Title: ST (X) Delete
Name: THYSSEN, MAXIMILIAN
Address: LOEWENGRUBE 18
City-St-Zip: MUENCHEN, GERMANY, D80 333

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: THYSSEN, MAXIMILIAN
Address: 301 S NEW YORK AVE SUITE 200
City-St-Zip: WINTER PARK, FL 32789 US

Title: ST (X) Change () Addition
Name: THYSSEN, MAXIMILIAN
Address: 301 S. NEW YORK AVENUE, SUITE 200
City-St-Zip: WINTER PARK, FL 32789 US

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: MAXMILIAN THYSSEN

PD

04/29/2007

Electronic Signature of Signing Officer or Director

_____ Date