FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P94000076745 (6)

ARK INTERNATIONAL, INC.

FILED Feb 21 1997 8:00am Secretary of State

Principal Place of Business Mailing Address										
RT 1 BOX 384 - H MURPHY NC 28306		RT 1 BOX 384 - H MURPHY NC 28906-9152	RT 1 BOX 384 - H							
						3. Date incorporated or Qualified 10/14/1994	3a. Date of L 08/07/19		ort	7
2. Principal Pl	2a. Mailing Address	Mailing Address			4. FEI Number	Applied For				
21		26				59-3271458 Not Applic				↲
Suite, Apt. :	#, etc	Suite, Apt. #, etc.	27			6. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State)	City & State	¬			Election Campaign Financing Trust Fund Contribution	ing \$5.00 May Be Added to Fees			
Zip 24	Country 25	Z(p	n [n			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
	9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New Reg	Istered Agent]
GUP	TON, JACK			61	Name					
	27 LEM TURNER RD			62	Street Addi	ress (P.O. Box Number is Not Acceptabl	9)			7
JAC	KSONVILLE FL 32218			B3						4
							······································			↓
				84	City		FL 85	Zip Co	ide	
office or re	to the provisions of Sections 607.0 egistered agent, or both, in the St m familiar with, and accept the ob	ate of Florida, Such change was	authorized	d by	the corporat	poration submits this statement for the pulion's board of directors. I hereby accept	rpose of chang the appointme	ing its re	registered gistered	1
SIGNATURE	Training Will, and accept the oc	ingations or occiton portoppo, Fr	orjou otut	0.00						
	Signature, typed or pented name of registered			d Age	nt signatura requi	red when reinstating)	DATE		11.10	۱,
12.	OFFICERS :	AND DIRECTORS DELETE	13. 1.1 YITLE			ADDITIONS/CHANGES TO OFFICE	:HS AND DIREC		IN 12 Addition	- 8
NAME	RUSSELL, GEORGE	C) DICEIL	1.2 NAME		l		٠.١٠ لـــــ	nigo (Addition	18
STREET ADORESS	RT 1 BOX 384 - H		1.3 STREE		ADORESS					8
CRY-ST-ZIP	MURPHY NC 28906		1.4 CITY-							Š
TITLE	STD	DELETE	2.1 TITLE				Ch	ınge	Addition	70
NAME	RUSSELL, LORI J.		2.2 N/	AME		73	*			
STREET ADDRESS	RT 1 BOX 384 · H		2.3 STREE		ADDRESS					
City - St - ZiP	MURPHY NC 28906	T DELETE	2. 4 CITY-		T-ZIP] Ch		Addition	\perp
TITLE NAVE		☐ DELETE	3.1 TITLE 3.2 NAME				, LII	m y c ∣	ווטוווטטא נייין	
STREET ADORESS			3.3 STREE		ADOBESS					1
CHY-S1-78P			3.4. CITY -							-
TILE		DELETE	4.1 TITLE			······································	Ch	ange	Addition	7
NAME			4. 2 NAME							1
STREET ADORESS			4.3 ST	TREET	ADDRESS					
CITY-S1-ZIP				IY-S	T-ZIP	······				_
TITLE		DELETE	5111				Ch	inge	Addition	
NAME			52 N			1				1
STREET ADDRESS					address					
CHY-ST-ZIP TOTALE		☐ DELETE	5.4 CI 6.1 TI		I-ZIP		☐ Ch	ange	Addition	-
NAME		_ ottale	6.2 N				الاسبا	gu	Land Association	
STREET ADDRESS					ADDRESS					1
CITY - S1 - ZIP				ITY - S'	1					
	by certify that the information supp	lied with this filing does not qual				d in Section 119.07(3)(i). Florida Statutes	. I further certify	that th	e	1

information indicated on this annual report or supplemental annual report is true and I am an officer or director of the dorphration or the receiver or trustee empowered to appears in Block 12 or Block 13 if changed or por an attachment with an address. d that my signature shall have the same legal effect as if made under oath; that report as required by Chapter 607, Florida Statutes; and that my name