

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000079386

FILED  
Apr 08, 2009  
Secretary of State

Entity Name: ARLAK CORP.

**Current Principal Place of Business:**

5104 CANTERBURY DRIVE  
SARASOTA, FL 34243

**New Principal Place of Business:**

**Current Mailing Address:**

16528 N. DALE MABRY HWY.  
TAMPA, FL 33618

**New Mailing Address:**

FEI Number: 65-0950996

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KANTER, ROBERT A  
5104 CANTERBURY DRIVE  
SARASOTA, FL 34243 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: D ( ) Delete  
Name: KANTER, ROBERT A  
Address: 5104 CANTERBURY DRIVE  
City-St-Zip: SARASOTA, FL 34243

Title: D ( ) Delete  
Name: KANTER, BARBARA  
Address: 5104 CANTEBURY DR  
City-St-Zip: SARASOTA, FL 34243

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: WALTER SANDERS

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04/08/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date