2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000074556

Entity Name: TEKMIND, INC

City-St-Zip:

MIAMI, FL 33174

FILED Feb 08, 2008 Secretary of State

•		,					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
8862 W FL	AGLER STR	EET .					
UNIT 4	00171						
MIAMI, FL	33174						
Current Mailing Address:			New Maili	New Mailing Address:			
	AGLER STR	EET					
UNIT 4 MIAMI, FL	33174						
	: 02-0630386	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()		
		Current Registered Agent:		. ,	New Registered Agent:		
Maine and	Addiess of	Surrent Registered Agent.	Name and	Address Of	New Registered Agent.		
	LE, TIMOTHY LAGLER STRI 33174 US						
	e of Florida.	submits this statement for the	purpose of changing i	its registered	office or registered agent, or b	oth,	
	Electro	nic Signature of Registered Ag	ent		Date		
Election Car	npaign Financir	g Trust Fund Contribution ().					
210001011 001	pag	g react and continuation ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title:	,) Delete	Title:	() Change () Addition		
Name:	ROBITAILLE,		Name:				
Address: City-St-Zip:	MIAMI, FL 33	LER STREET, UNIT 4 174	Address: City-St-Zip:				
	,	•					
Title:	,) Delete	Title:		(X) Change () Addition		
Name: Address:	ROBITAILLE, ²		Name: Address:	ROBITAILLE, 50 E 57TH S			
City-St-Zip:		INES, FL 33029	City-St-Zip:				
Title:	VP () Delete	Title:	(() Change () Addition		
Name:	PEREZ-POVE		Name:				
Address:	8862 W FLAG	FR STREET LINIT 4	Address:				

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.

City-St-Zip:

SIGNATURE: TIMOTHY ROBITAILLE PST 02/08/2008