2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 247745

4505 VICTORIA DRIVE

MT. KISCO, NY 10549

BERNACCHIA, ROBIN

YONKERS, NY

90 CONSTANT AVENUE

() Delete

Address

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

FILED Jan 04, 2005 Secretary of State

Entity Nar	ne: MOHAN	ISIC CORP.					
Current Principal Place of Business:				New Principal Place of Business:			
	MPOND RD VN HEIGHTS	s, NY 105980701					
Current Mailing Address:				New Mailing Address:			
	RAL AVENU LE, NY 1058						
FEI Number: 58-0860809 FEI Number Applied For ()			olied For()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
1200 S. PII	ORATION SY NE ISLAND F ON, FL 3332	ROAD					
	named entity e of Florida.	submits this state	ement for the pu	rpose of changing i	ts registere	ed office or registered agent, or both	;
SIGNATUR	RE:						
	Electro	onic Signature of F	Registered Agen	t		Date	
Election Car	npaign Financi	ng Trust Fund Contr	ibution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DST (CURRY, B. F 50 INVERNES SCARSDALE	SS RD		Title: Name: Address: City-St-Zip:	DP CURRY III, 4 BELMON RYE, NY 1		
Title: Name: Address: City-St-Zip:	DPA (CURRY III, B 4 BELMONT A RYE, NY 108	AVENUE		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name:	A (CURRY-YOU) Delete NG, LEIGH		Title: Name:	A CURRY-YO	(X) Change()Addition DUNG, LEIGH	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

12 STOCKBRIDGE ROAD

() Change () Addition

MT. KISCO, NY 10549

SIGNATURE: BERNARD F. CURRY III P 01/04/2005