2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 03, 2003
Secretary of State

DOCUMENT# F02000003496

Entity Name: K&K EXPRESS, INC.

Current Principal Place of Business:

1801 E. 79TH STREET, SUITE 5
BLOOMINGTON, MN 55425

New Principal Place of Business:

Current Mailing Address:

1801 E. 79TH STREET, SUITE 5
BLOOMINGTON, MN 55425

New Mailing Address:

FEI Number: 41-1554444 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

YOKEUM, KENNETH E
6701 N.W. 7TH STREET, UNIT 56
MIAMI, FL 33126 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: P ( ) Delete
Name: PICKERING, KERRY
Address: 1801 E. 79TH STREET, SUITE 5
City-St-Zip: BLOOMINGTON, MN 55425

Title: STD ( ) Delete
Name: GUSTAFSON, LISA
Address: 1801 E. 79TH STREET, SUITE 5
City-St-Zip: BLOOMINGTON, MN 55425

Title: C ( ) Delete
Name: WALHOF, CHRISTIAAN G
Address: 1801 E. 79TH STREET, SUITE 5
City-St-Zip: BLOOMINGTON, MN 55425

Title: D ( ) Delete
Name: HILL, DAVID
Address: 1801 E. 79TH STREET, SUITE 5
City-St-Zip: BLOOMINGTON, MN 55425

Title: V ( ) Delete
Name: YOKEUM, KENNETH E
Address: 6701 N.W. 7TH STREET, UNIT 56
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 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.

SIGNATURE: SHARIF AZAD CONT 01/03/2003

Electronic Signature of Signing Officer or Director Date