

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G05086

Entity Name: HKI, INC.

FILED  
Jan 29, 2004  
Secretary of State

## Current Principal Place of Business:

1885 SW 4TH AVE  
BLDG E #3  
DELRAY BCH, FL 33444 US

## Current Mailing Address:

1885 SW 4TH AVE  
BLDG E #3  
DELRAY BCH, FL 33444 US

FEI Number: 59-2420806

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

IOVINO, CLAUDIA  
1885 SW 4TH AVE  
BLDG E #3  
DELRAY BCH, FL 33444 US

## New Principal Place of Business:

1885 SW 4TH AVE  
BLDG. E3  
DELRAY BCH, FL 33444 US

## New Mailing Address:

1885 SW 4TH AVE  
BLDG. E #3  
DELRAY BCH, FL 33444 US

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: PD ( ) Delete  
Name: KATZ, HARVEY,  
Address: 50 EAST RD #7E  
City-St-Zip: DELRAY BCH, FL 33483

Title: STD ( ) Delete  
Name: IOVINO, CLAUDIA,  
Address: 6364 AMBERWOODS DR.  
City-St-Zip: BOCA RATON, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: KATZ, HARVEY,  
Address: 5505 FAIRWAY PARK DR. #203  
City-St-Zip: BOYNTON BEACH, FL 33437

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: CLAUDIA IOVINO

STD

01/29/2004

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

\_\_\_\_\_  
Date