2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 02, 2005 08:00 AM Secretary of State

DOCU 1. Entity Nam D&K U.S.		-		Seci	etary of State
Principal Plac 10475 NW 3 MIAMI, FL 3		Mailing Address : 10475 NW 37 TERRACE MIAMI, FL 33178			
	O NOT WRITE 6. Name and Address of Current Re		CE	04222005 No Chg-P 4. FEI Number 65-0048942 5. Certificate of Status Desired	CR2E034 (10/03) Applied For Not Applicable \$8.75 Additional Fee Required
KHEMLANI, DEEPAK 10631 SW 75 LANE MIAMI, FL 33173 —			DO NOT WRITE IN THIS SPACE		
8. The abuve named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or profed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
After M	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00			00 May Be ad to Fees	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DI D KHEMLANI, DEEPAK 10631 SW 75 LANE MIAMI, FL	RECTORS)358337 · · · · · · · · · · · · · · · · · ·
NAME STREET ADDRESS CITY-ST-ZIP	S VIDYA KHEMLANI 10631 SW 75TH LANE MIAMI, FL			05/04/05-	-80110-013 150.00
TITLE MAME STREET ADDRESS CITY-ST-ZIP				DO NOT WE	terra i i e e e e e e e e e e e e e e e e e
NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPA	ACE
title Name Street Address City-St-Zip					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
indicated	certify that the information supplied with the on this report or supplemental report is treporation or the received or trustee empower or on an attachment with an address, with	ue and accurate and that my signat	ure shall have the s	ame legal effect as if made under oat	h; that I am an officer or director

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: