

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L87809

Entity Name: KHANMO, INC.

FILED
Jan 21, 2005
Secretary of State

Current Principal Place of Business:

3551 NE 5TH AVE
FT LAUDERDALE, FL 33334

New Principal Place of Business:

Current Mailing Address:

3551 NE 5TH AVE
FT LAUDERDALE, FL 33334

New Mailing Address:

FEI Number: 65-0219423

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOHAMED, YUSSUF
3551 NE 5TH AVE
FT LAUDERDALE, FL 33334 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: CMP () Delete
Name: MOHAMED, YUSSUF,
Address: 19355 NE 10TH AVE 501
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: D () Delete
Name: WILLIAMS, ROY L.
Address: 10030 NW 37TH STREET
City-St-Zip: HOLLYWOOD, FL 33024

Title: D () Delete
Name: INDRA MOHAMED,
Address: 19355 NE 10 AVE 501
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: D () Delete
Name: WILLIAMS, GLORIA N.
Address: 10030 NW 37TH ST
City-St-Zip: HOLLYWOOD, FL 33024

Title: VT () Delete
Name: REID, MICHAEL K
Address: 11399 WHISPER SOUND DRIVE
City-St-Zip: BOCA RATON, FL 33428

Title: S () Delete
Name: REID, LISA A
Address: 11339 WHISPER SOUND DR
City-St-Zip: BOCA RATON, FL 33428

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:

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: MICHAEL REID

VT

01/21/2005

Electronic Signature of Signing Officer or Director

Date