


**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2004 08:00 AM
Secretary of State

DOCUMENT # N00000006180 1. Entity Name SIKHS FOR TECHNOLOGY CORP.	
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Principal Place of Business 1779 EARHART COURT DAYTONA BCH, FL 32128	Mailing Address 1779 EARHART COURT DAYTONA BCH, FL 32128
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04052004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3670959	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SINGH, HERMAN 500 E SEMORAN BLVD SUITE 2-J CASSELBERRY, FL 32707	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$81.25 Due by May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	1100000128237 04/26/04-80025-025 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SODHI, BHUPINDER S 1779 EARHART COURT DAYTONA BEACH, FL 32124
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD GILL, RAJANDER S 1779 EARHART COURT DAYTONA BEACH, FL 32124
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T SODHI, SARANJIT K 1779 EARHART COURT DAYTONA BEACH, FL 32124
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SODHI, MANMOHAN S 1779 EARHART COURT DAYTONA BEACH, FL 32124
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SODHI, SUKHPAUL S 1779 EARHART COURT DAYTONA BEACH, FL 32124
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Saranjit Sodhi **SARANJIT SODHI** 04/20/04 (386) 304-9919
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #