2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000031184

Entity Name: TEKNIK SHIPMENT DYNAMICS, INC.

FILED Apr 26, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1340 E.VINE ST 3601 COMMERCE BLVD. 321 В KISSIMMEE, FL 34744 KISSIMMEE, FL 34741 **Current Mailing Address: New Mailing Address:** P.O BOX420092 KISSIMMEE, FL 34742 FEI Number: 59-3663385 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANSARI, HASSAN Z 605 ABÁCO COURT KISSIMMEE, FL 34746 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition HASSAN, SAEED U Name: Name: 1915 ELLERY LANE Address: Address: City-St-Zip: KISSIMMEE, FL 34746 City-St-Zip: Title: Title: () Delete () Change () Addition Name: QURESHI, JAVED Name: 1915 ELLERY LANE Address: Address: KISSIMMEE, FL 34746 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition BEGUM, KHURSHIDA Name: Name: 1915 FLI FRY LANE Address: Address: City-St-Zip: KISSIMMEE, FL 34746 City-St-Zip: Title: () Delete Title: () Change () Addition SIDDIQ, SHEIKH Name: Name: Address: 1915 ELLERY LANE Address: City-St-Zip: KISSIMMEE, FL 34746 City-St-Zip: Title: Title: () Delete () Change () Addition SADIQ, SHEIKH M Name: Name: 1915 ELLERY LANE Address: Address: City-St-Zip: KISSIMMEE, FL 34746 City-St-Zip: Title: () Delete Title: () Change () Addition AHMED, MOHAMMAD S Name: Name: Address: 1915 ELLERY LANE Address:

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.

City-St-Zip:

SIGNATURE: SAEED UL HASAN D 04/26/2004

City-St-Zip:

KISSIMMEE, FL 34746