


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 20, 2004 8:00 am
Secretary of State

03-30-2004 90008 024 ***150.00
09-20-2004 90005 003 ***150.00

DOCUMENT # P01000068889		
1. Entity Name ACHORD SYSTEMS, INC.		

Principal Place of Business 9480 PRINCETON SQ. BLVD. #2110 JACKSONVILLE, FL 32256	Mailing Address 720 ST. JOHNS BLUFF RD. #4 JACKSONVILLE, FL 32225
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2. Principal Place of Business 646 Pinrail Ln	3. Mailing Address 646 Pinrail Lane
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Foster City Ca	City & State Foster City
Zip 94404	Zip 94404
Country	Country



08032004 Chg-P CR2E034 (10/03)

4. FEI Number 59-3739238	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
KULKARNI, RAJANDRA 9480 PRINCETON SQ BLVD #2110 JACKSONVILLE, FL 32256

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
State FL Zip Code

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KULKARNI, RAJENDRA 9480 PRINCETON SQUARE BLVD., #2110 JACKSONVILLE, FL 32256
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 607, 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:  **5 Sep 2004**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

April 1, 2004

ACHORD SYSTEMS, INC.
720 ST. JOHNS BLUFF RD. #4
JACKSONVILLE, FL 32225

Subject: ACHORD SYSTEMS, INC.

Reference Number: P01000068889

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/RJ
ANNUAL REPORTS SECTION