2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000074556

Entity Name: TEKMIND, INC.

FILED Feb 15, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

7120 NW 179TH ST 8862 W FLAGLER STREET

STE 101 UNIT 4

MIAMI, FL 33015 MIAMI, FL 33174

Current Mailing Address: New Mailing Address:

7120 NW 179TH ST 8862 W FLAGLER STREET STE 101 UNIT 4

MIAMI, FL 33015 MIAMI, FL 33174

FEI Number: 02-0630386 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:

ROBITAILLE, TIMOTHY
7120 NW 179TH STREET #101

8862 W FLAGLER STREET, UNIT 4

MIAMI, FL 33015 US MIAMI, FL 33174 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: 02/15/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST () Delete Title: PST (X) Change () Addition

Name: ROBITAILLE, TIMOTHY Name: ROBITAILLE, TIMOTHY
Address: 7120 NW 179TH STREET STE 101 Address: 8862 W FLAGLER STREET, UNIT 4

City-St-Zip: HIALEAH, FL 33015 Address. 6802 W FLAGLER STREET, C

Title: VP () Delete Title: () Change () Addition

 Name:
 ROBITAILLE, TY
 Name:

 Address:
 7120 NW 179TH STREET STE 101
 Address:

 City-St-Zip:
 HIALEAH, FL 33015
 City-St-Zip:

 Title:
 () Delete
 Title:
 VP () Change (X) Addition

 Name:
 Name:
 PEREZ-POVEDA, VALERIE

 Address:
 Address:
 8862 W FLAGLER STREET, UNIT 4

City-St-Zip: City-St-Zip: MIAMI, FL 33174

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: TIMOTHY ROBITAILLE PST 02/15/2006