

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 08:
Secretary of St

DOCUMENT # P02000105634

1. Entity Name
KANA INTERNATIONAL, INC.



Principal Place of Business Mailing Address

**950 S WINTER PARK DR, STE 305
 CASSELBERRY, FL 32707** **950 S WINTER PARK DR, STE 305
 CASSELBERRY, FL 32707**



04222006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
14-1878579 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**KUMAR JOSHI, SAVITABEN M
 950 S WINTER PARK DR, STE 305
 CASSELBERRY, FL 32707**

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

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$350.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KUMAR JOSHI, SAVITABEN M 950 S WINTER PARK DR, STE 305 CASSELBERRY, FL 32707
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST JOSHI, MUKESH N 950 S WINTER PARK DR, STE 305 CASSELBERRY, FL 32707
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 05/17/06-80089-008 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: KUMAR JOSHI, SAVITABEN M. *Savitaben M. Joshi* *23-Apr-06* 2006

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #