2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000097411

Entity Name: BENGAL ENGINEERING, INC.

FILED Mar 06, 2006 Secretary of State

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

8240 HEDGWOOD DRIVE JACKSONVILLE, FL 32216

Current Mailing Address: New Mailing Address:

8240 HEDGWOOD DRIVE JACKSONVILLE, FL 32216

FEI Number: 54-2125439 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HYDER, ZAFAR
4367 AUTUMN RIVER RD E
8240 HEDGEWOOD DRIVE

JACKSONVILLE, FL 32224 US JACKSONVILLE, FL 32216 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: ZAFAR HYDER 03/06/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: HYDER, ZAFAR
Address: 4367 AUTUMN RIVER RD E

Name: HYDER, ZAFAR
Address: 8240 HEDGEWOOD DRIVE

Address: 4367 AUTUMN RIVER RD E Address: 8240 HEDGEWOOD DRIVE City-St-Zip: JACKSONVILLE, FL 32224 City-St-Zip: JACKSONVILLE, FL 32216

 $\label{eq:title:V} \mbox{Title:} \qquad \mbox{V} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{V} \qquad \mbox{(X) Change () Addition}$

Name: KHAN, SHAHEEN Name: KHAN, SHAHEEN

 Address:
 4367 AUTUMN RIVER RD E
 Address:
 8240 HEDGEWOOD DRIVE

 City-St-Zip:
 JACKSONVILLE, FL 32224
 City-St-Zip:
 JACKSONVILLE, FL 32216

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: ZAFAR HYDER P 03/06/2006