2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000118655

FILED Apr 22, 2005 08:00 AM Secretary of State

1. Entity Nam NIKY TEL	EX CORP.					J	
Principal Plac	e of Business _	Mailing Address	<u></u>		*		
7250 W. 241	TH AVE.	7250 W. 24TH AVE.					*
SUITE 4 HIALEAH, FL	22010	SUITE 4 HIALEAH, FL 33018					
i niallan, fl	23010	THALEAH, FE 33010					
				04192005	No Chg-P	CR2E034 (10	/03)
	OO NOT WRITE	IN THIS SPA	CE	4. FEI Numb 20-030		-	Applied For Not Applicable
}					of Status Desired	□ \$8.75 Fee Re	Additional adulted
	5. Name and Address of Current Re	gistered Agent			3 7 DE 102		- Care
DEL 0 4 D 0	IODOF!		<u> </u>				
), JORGE L / 80TH COURT	DO NOT WRITE					
APT, 1209)		·-· · INI "	THIC CE	DACE		
HIALEAH	GARDENS, FL 33016		IN THIS SPACE				
{							-
	e named entify submits this statement for t tions of registered agent.		Dire	Delga	th, in the State of Fl	orida. 1 am familiar	with, and accept
	Signalure, was der printed name of registered agent and	title if applicable. (NOTE Registe	ered Agent signature req	uired when reinstating)	······································	blue	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees			
10.	OFFICERS AND DI	RECTORS					· · · · · · · · · · · · · · · · · · ·
TITLE	PD	* * *	<u></u>				
NAME	DELGADO, JORGE L 10090 NW 80TH COURT APT, 120						
STREET ADDRESS CITY-SY-ZIP	HIALEAH GARDENS, FL 33016		1				
TITLE			- -		Honon	ารวรควก	
NAME			1		04/22/05	132392 0 -80072-020	150.00
STREET ADDRESS							
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12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), 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 of 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:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TURSE DELLA CI

e Daytime Phone #