

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000031250

**FILED**  
**Apr 29, 2005**  
**Secretary of State**

**Entity Name:** KONACK MODERN RESTORATION INC.

**Current Principal Place of Business:**

1540 FOREST LAKES CIR APT A  
WEST PALM BEACH, FL 33406

**New Principal Place of Business:**

2724 HELYN RD  
LAKE WORTH, FL 33461

**Current Mailing Address:**

1540 FOREST LAKES CIR APT A  
WEST PALM BEACH, FL 33406

**New Mailing Address:**

2724 HELYN RD  
LAKE WORTH, FL 33461

**FEI Number:** 54-2147657

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AYKUT, FAIK  
5640 SW 54 CT  
DAVIE, FL 33314 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: AYKUT, FAIK  
Address: 1540 FOREST LAKES CIR APT A  
City-St-Zip: WEST PALM BEACH, FL 33406

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: AYKUT, FAIK  
Address: 2724 HELYN RD  
City-St-Zip: LAKE WORTH, FL 33461

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FAIK AYKUT

MR

04/29/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date