

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000155940

Entity Name: ISKA & MIKA INC.

FILED
Apr 06, 2005
Secretary of State

Current Principal Place of Business:

3404 NORFOLK STREET
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

3404 NORFOLK STREET
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 20-1824785

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKIBA, DEREK CPA
551 SE 13 STREET
POMPANO BEACH, FL 33060 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: DIR () Delete
Name: PINZON, MAAIKE M
Address: 344 WEST CORAL TRACE CIRCLE
City-St-Zip: DELRAY BEACH, FL 33445

Title: DIR () Delete
Name: KJOS, ISKE
Address: 3404 NORFOLK STREET
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: PINZON, MAAIKE M
Address: 12541 COLONY PRESERVE DRIVE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MAAIKE PINZON

DIR

04/06/2005

Electronic Signature of Signing Officer or Director

_____ Date