

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000163171

Entity Name: ALAKH CORP.

FILED
Dec 03, 2005
Secretary of State

Current Principal Place of Business:

1518 N SCENIC HWY
LAKE WALES, FL 33853

New Principal Place of Business:

200 S SCENIC HWY
LAKE WALES, FL 33853

Current Mailing Address:

1518 N SCENIC HWY
LAKE WALES, FL 33853

New Mailing Address:

706 WILDABON AVE
LAKE WALES, FL 33853

FEI Number: 42-1652923

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATRA, GAYATRIBEN
1518 N SCENIC HWY
LAKE WALES, FL 33853 US

Name and Address of New Registered Agent:

PATRA, GAYATRIBEN
706 WILDABON AVE
LAKE WALES, FL 33853 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: PATRA, GAYATRIBEN

12/03/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PATRA, GAYATRIBEN
Address: 1518 N SCENIC HWY
City-St-Zip: LAKE WALES, FL 33853

Title: D () Delete
Name: KABRA, ARPITABEN
Address: 1518 N SCENIC HWY
City-St-Zip: LAKE WALES, FL 33853

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PATRA, GAYATRIBEN
Address: 706 WILDABON AVE
City-St-Zip: LAKE WALES, FL 33853

Title: D (X) Change () Addition
Name: KABRA, ARPITABEN
Address: 706 WILDABON AVE
City-St-Zip: LAKE WALES, FL 33853

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: PATRA, GAYATRIBEN

D

12/03/2005

Electronic Signature of Signing Officer or Director

Date