

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000040611

FILED
Apr 29, 2006
Secretary of State

Entity Name: BLACK KNIGHT SERVICES INC

Current Principal Place of Business:

9369 DUBOIS BLVD
ORLANDO, FL 32825

New Principal Place of Business:

Current Mailing Address:

9369 DUBOIS BLVD
ORLANDO, FL 32825

New Mailing Address:

FEI Number: 20-2515988

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LEON-MARINO, EKATERINE
9369 DUBOIS BLVD
ORLANDO, FL 32825 US

Name and Address of New Registered Agent:

SIU, EKATERINE
9369 DUBOIS BLVD
ORLANDO, FL 32825 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: E.SIU

04/29/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEON-MARINO, EKATERINE
Address: 9369 DUBOIS BLVD
City-St-Zip: ORLANDO, FL 32825

Title: VP () Delete
Name: SIU, DIEGO JR
Address: 9369 DUBOIS BLVD
City-St-Zip: ORLANDO, FL 32825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SIU, EKATERINE
Address: 9369 DUBOIS BLVD
City-St-Zip: ORLANDO, FL 32825

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 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: E.SIU

P

04/29/2006

Electronic Signature of Signing Officer or Director

Date