

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2006 8:00 am
Secretary of State

02-03-2006 90010 045 ***150.00

DOCUMENT # P05000066320 1. Entity Name T.K.X. INC.																			
Principal Place of Business 15201 NORTH CLEVELAND AVENUE SUITE 970 FORT MYERS, FL 33903		Mailing Address 15201 NORTH CLEVELAND AVENUE SUITE 970 FORT MYERS, FL 33903																	
2. Principal Place of Business 15201 North Cleveland Avenue, Suite 970 City & State Fort Myers, FL Zip 33903		3. Mailing Address 7-8 Chatham Sq Suite, Apt. #, etc. Suite # 802 City & State New York Zip NY 10038																	
4. FEI Number 20-2857043		Applied For <input type="checkbox"/> Not Applicable																	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																	
6. Name and Address of Current Registered Agent NGUYEN, PHONG 15201 NORTH CLEVELAND AVENUE SUITE 970 FORT MYERS, FL 33903		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <i>Phong Nguyen</i> (NOTE: Registered Agent signature required when reinstating) DATE: 01/25/06																			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																	
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 70%;">President <input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>Nguyen, Phong</td> </tr> <tr> <td>STREET ADDRESS</td> <td>15201 North Cleveland Ave</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>Suite 970, Fort Myers, FL 33903</td> </tr> </table>		TITLE	President <input type="checkbox"/> Delete	NAME	Nguyen, Phong	STREET ADDRESS	15201 North Cleveland Ave	CITY-ST-ZIP	Suite 970, Fort Myers, FL 33903	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 70%;">Change <input type="checkbox"/> Addition <input type="checkbox"/></td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> </table>		TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>	NAME		STREET ADDRESS		CITY-ST-ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: <i>Phong Nguyen</i> Date: 01/25/2006 Daytime Phone #																			

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