## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000141747

Entity Name: M.I.N.K.H. INTERNATIONAL, INC.

FILED May 12, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
160 W. CAMINO REAL #172 BOCA RATON, FL 33432				160 W. CAMINO REAL 172 BOCA RATON, FL 33432			
Current Mailing Address:				New Mailing Address:			
160 W. CAMINO REAL #172 BOCA RATON, FL 33432				160 W. CAMINO REAL 172 BOCA RATON, FL 33432			
FEI Number: 20-3655359 FEI Number Applied For ( ) FEI Number			FEI Numl	mber Not Applicable ( ) Certificate of Status Desired ( )			
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
SMITH, AARON T 160 W. CAMINO REAL #181 BOCA RATON, FL 33432 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:							
	Electronic	Signature of Registered Agent		Date			
Election Cam		(2)(b), F.S., the corporation did not re Trust Fund Contribution (X). ORS:		-		TO OFFICERS	AND DIRECTORS:
Title: Name: Address: City-St-Zip:	PRES () I SMITH, AARON T 160 W. CAMINO BOCA RATON, F	REAL #181	!	Title: Name: Address: City-St-Zip:	( )	Change ( ) Additio	n
Title: Name: Address: City-St-Zip:	SECR () I SMITH, AARON T 160 W. CAMINO BOCA RATON, F	REAL #181	1	Title: Name: Address: City-St-Zip:	( )	Change ( ) Additio	n
Title: Name: Address: City-St-Zip:	TREA () [ SMITH, AARON T 160 W. CAMINO BOCA RATON, F	REAL #181	1	Title: Name: Address: City-St-Zip:	( )	Change ( ) Additio	n
Title: Name: Address: City-St-Zip:	DIR () [ SMITH, AARON T 160 W. CAMINO BOCA RATON, F	- REAL #181	1	Title: Name: Address: City-St-Zip:	()	Change ( ) Additio	n
Title: Name: Address: City-St-Zip:	DIR ( ) DI KIRBY, CLAREN 15 ICARUS G. SACRAMENTO, O		1	Title: Name: Address: City-St-Zip:	DIR (X) KIRBY, CLAREN 15 ICARUS CT. SACRAMENTO,		on
Title: Name: Address: City-St-Zip:	1()	Delete	1	Title: Name: Address: City-St-Zip:	DIR () KIMANI, CONYE 1235 SILVER RI SACRAMENTO,	IDGE WAY	on

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: AARON SMITH PRES 05/12/2006