

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90277 041 ***158.75

DOCUMENT # P94000003911	
1. Entity Name KHEOPS INTERNATIONAL, INC.	

Principal Place of Business 2949 RAGIS ROAD EDGEWATER FL 32132 US	Mailing Address P O BOX 213 NEW SMYRNA BEACH FL 32170-0213 US
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2. Principal Place of Business 232 Trooper L.G.L. Mem Hwy	3. Mailing Address P.O. Box 177
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Colebrook NH	City & State Colebrook NH
Zip 03576	Zip 03576
Country USA	Country USA

44026810

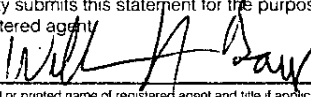


MOORE CR2E034 (11/03)

4. FEI Number 59-3217467	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent VAILLANT, MARIE-JOSEE 2969 RAGIS ROAD EDGEWATER FL 32132	
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7. Name and Address of New Registered Agent Name William N. Gamber	
Street Address (P.O. Box Number is Not Acceptable)	
City FL	Zip Code

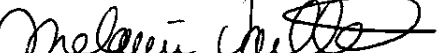
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE 	DATE 4/5/04
(NOTE: Registered Agent signature required when reinstating)	

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE D	☒ Delete
NAME LEBLANC, BENOIT	
STREET ADDRESS 2969 RAGIS ROAD	
CITY-ST-ZIP EDGEWATER FL 32132	
TITLE ST	☐ Delete
NAME VAILLANT, MELANIE	
STREET ADDRESS 2969 RAGIS ROAD	
CITY-ST-ZIP EDGEWATER FL 32132	
TITLE P	☐ Delete
NAME VAILLANT, MARIE-JOSEE	
STREET ADDRESS 2969 RAGIS RD	
CITY-ST-ZIP EDGEWATER FL	
TITLE D	☐ Delete
NAME GAGNE, H. SARAH	
STREET ADDRESS 2949 RAGIS RD.	
CITY-ST-ZIP EDGEWATER FL 32132	
TITLE VP	☐ Delete
NAME FOREST, PIERRE	
STREET ADDRESS 2949 RAGIS RD.	
CITY-ST-ZIP EDGEWATER FL 32132	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE David Belanger	☐ Change ☒ Addition
NAME 118 Main St. Apt #3	
STREET ADDRESS Colebrook NH 03576	
CITY-ST-ZIP Director	
TITLE Melanie Vaillant	☒ Change ☐ Addition
NAME RR 2 Box 401	
STREET ADDRESS Colebrook NH 03576	
CITY-ST-ZIP Treasurer	
TITLE Marie-Josée Vaillant	☒ Change ☐ Addition
NAME R.R. 2 Box 401	
STREET ADDRESS Colebrook NH 03576	
CITY-ST-ZIP President	
TITLE Sarah H. Gagne	☒ Change ☐ Addition
NAME R.R. 2 Box 401	
STREET ADDRESS Colebrook NH 03576	
CITY-ST-ZIP Director	
TITLE Pierre Forest	☒ Change ☐ Addition
NAME R.R. 2 Box 401	
STREET ADDRESS Colebrook NH 03576	
CITY-ST-ZIP Vice-President	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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.	
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SIGNATURE: 	03-26-04	603-237-8188
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #