2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2005 8:00 am
Secretary of State
03-15-2005 90035 040 ***150.00

DOCUMENT # P94000003911

1. Entity Name
KHEOPS INTERNATIONAL, INC.

50026560

Principal Place of Business	Mailing Address
232 TROOPER L.G.L. MEM HWY COLEBROOK, NH 03576 US	P O BOX 177 COLEBROOK, NH 03576 US

02282005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

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	7. Name and Address of New Registered Agent
GAMBERT, WILLIAM N ~~2969 RAGIS ROAD~~ ~~EDGEWATER, FL 32132~~	Name: William N. Gambert Street Address (P.O. Box Number is Not Acceptable): 629 N. Peninsula Av. City: Daytona Beach FL Zip Code: 32118

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 _____ 3/8/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BELANGER, DAVID 118 MAIN ST. APT#3 COLEBROOK, NH 03576	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary - Treasurer Marie Gueymard 30 Parsons st Apt. 7 Colebrook NH 03576	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST VAILLANT, MELANIE RR2 BOX 401 COLEBROOK, NH 03576	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice - President Melanie Vaillant 105 Angels Rd, Colebrook NH 03576	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P VAILLANT, MARIE-JOSEE RR2 BOX 401 COLEBROOK, NH 03576	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Same 105 Angels Rd Same	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GAGNE, SARAH H R.R.2 BOX 401 COLEBROOK, NH 03576	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Same 105 Angels Rd Same	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP FOREST, PIERRE R.R.2 BOX 401 COLEBROOK, NH 03576	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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.

SIGNATURE: Melanie Vaillant 03.01.05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

603 237-8188 ext. 256
Daytime Phone #