## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jul 24, 2006 8:00 am Secretary of State

DOCUMENT # P95000003  1. Entity Name TECHNO ENGINEERING, INC	3091		1	2006 90003 006 ***558.75
Principal Place of Business 11911 US HWY 0 NU SUITE 201 N PALM BEACH, FL 33408 1	Mailing Address  1797705 HWY T  SUITE 201  N PALM BEACH, FL 33408	40 US HU SUITE	320	50022995
Principal Place of Business 840 US HWY ON 840 US HWY		twy one		
Suite, Apr. 4, etc.	Suite, Apt. #, etc. Suite, Apt. #, etc.		07202006 Chg-	P CR2E034 (11/05)
N. Palm Beach, Fl.	City & State N. Palm &	each, fl.	4. FEI Number 65-0545417	Applied For Not Applicable
Zip 33408 Country	33408 c	Country	5. Certificate of Status I	Desired \$8.75 Additional Fee Required
6. Name and Address of Current	Registered Agent	Name	7. Name and Address	of New Registered Agent
11911 US HWY 1, SLITEZO1		Street Address (P.O. Box Number is Not Acceptable)		
MPALMBEACH PC 33408 N. Palm Beach, fl.				
The above named entity submits this statement for	33700	5 00	ered acent, or both, in the S	FL Zip Code
the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and the (IAdopticable. (NOTE: Registered Agent signature required when reinstating)  DATE				
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006	S. Election Campaign F     Trust Fund Contribut		5.00 May Be ided to Fees	
10. OFFICERS AND	DIRECTORS Delete	TILE	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS IN 11
NAME DTAHANSHAHI, MEHRNAZ K STREET ADDRESS 1207 GENERAL POINTE TRACI CITY-ST-ZIP PALM BEACH GARDENS, FL 3	=	NAME STREET ADDRESS CITY-ST-ZIP		
TITLE	☐ Delicie	TITLE		☐ Change ☐ AddStion
STREET. GONESS CRIY-SI-ZIP		STREET ADDRESS CITY-ST-ZIP		
IIILE .	☐ Delete	TITLE		Change Addition
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP		
ITILE NAME	☐ Delete	TITLE		☐ Change ☐ Addition
STREET ADDRESS CETY-ST-ZEP		STREET ADDRESS CITY-ST-ZIP		
mie	☐ Delicte	TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS		STREET ADDRESS CITY-ST-ZEP		
UTY-ST-ZP	☐ Delete	TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS	1	NAME STREET ADDRESS CITY-ST-ZIP		
CITY-SI-ZIP		ALL OF CIT		
12. I hereby certify that the information supplied with indicated on this report or supplied material	h this fitting does not qualify for the	e exemptions contains	ed in Chapter 119, Florida S	Statutes. I further certify that the information de under path; that I am an officer or director
12. I hereby certify that the information supplied wit indicated on this report or supplemental report of the corporation or the receiver or trustee eng- changed, or on an attachment with availabless.	s true and accurate and that my s lowered to execute this report as r	ionature shall have the	e same legal effect as if mai 07, Florida Statutes; and tha	de under oeth: that I am an othcer or director