

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000087067

Entity Name: K' ONDA, INC.

FILED
May 15, 2006
Secretary of State

Current Principal Place of Business:

3587 LAKE EMMA RD
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

2774 MARSH WREN CIR.
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 59-3370375

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MENDIZABAL, MIGUEL
1320 N. SEMORAN BLVD., STE. 108
ORLANDO, FL 32807 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FUX, ENRIQUE
Address: 2774 MARSH WREN CIR.
City-St-Zip: LONGWOOD, FL

Title: VP () Delete
Name: FUX, MYRIAM
Address: 2774 MARSH WREN CIR.
City-St-Zip: LONGWOOD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MYRIAM FUX

VP

05/15/2006

Electronic Signature of Signing Officer or Director

_____ Date