2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000008842

1. Entity Name KORKUT INC.

STE. 600

MIAMI, FL 33134

MIAMI, FL 33134

SIGNATURE:



FILED May 01, 2006 08:00 AN Secretary of State

Principal Place of Business 2100 PONCE DE LEON

Mailing Address 123 SE 3RD AVE. STE 105 MIAMI, FL 33131



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CR2E034 (11/05) 04262006 No Chg-P 4. FEI Number Applied For 65-0890366

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5. Certificate of Status Desired

\$8.75 Additional Fee Required

4/24/06 305.279.4/01

Not Applicable

GURIAN, JORGE 2100 PONCE DE LEON BLVD. SUITE 600

DO NOT WRITE IN THIS SPACE

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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 Signature, typed or printed name of registered agent and size if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Fin Trust Fund Contribution		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KORKUT, SABRI A 123 SE 3RD AVE., STE 105 MIAMI, FL 33131				<u>U00000553776</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GURIAN, JORGE 2100 PONCE DE LEON BLVD STE. MIAMI, FL 33134	600			05/15/06-80066-002 158.75
TITLE NAME STREET ADDRESS CITY - ST - ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 efficiency of the execute this report is 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					

NTED HAME OF SIGNING OFFICER OR DIRECTOR