2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000053705

1. Entity Name
AIKEN INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
20423 STATE ROAD 7	20423 STATE ROAD 7
#F6-339	#F6-339
BOCA RATON, FL 33498	BOCA RATON, FL 33498

DO NOT WRITE IN THIS SPACE

06172004   No Chg-P   CR2E034 (10/03)

4. FEI Number		Applied For
65-0926475		Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BULHACK, KENNETH F
9868 ORANGE PARK TRAIL
BOCA RATON, FL 33428

DO NOT WRITE IN THIS SPACE

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 title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $550.00 **Due by September 8, 2004**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees

000000172018
09/09/04--80007-009 550.00

10. OFFICERS AND DIRECTORS

TITLE	PTSD
NAME	BULHACK, KENNETH F
STREET ADDRESS	9868 ORANGE PARK TRAIL
CITY-ST-ZIP	BOCA RATON, FL 33428

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	-2-
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: _____ KENNETH BULHACK 9/6/04 561-883-0689

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #