2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S06115

FILED Jun 30, 2005 Secretary of State

Entity Name: T.K. INVESTMENTS & MANAGEMENT, INC.

CORRAL GABLES, FL 33143 Current Mailing Address: 8015 RED ROAD SUITE 215-A CORAL GABLES, FL 33143 FEI Number: 65-0246631 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALAM, TONI H CPA 8015 RED ROAD STE: 215-A CORAL GABLES, FL 33143 US 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. Electron Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: D () Delete Title: () Change () Addition Name: MAZEN, SUKKAR Name: Address: 2432 HOLLYWOOD, FL 33024 City-St-Zip: Title: P () Delete Title: () Change () Addition Name: Address: 5111 PINETREE DR City-St-Zip: Title: D () Delete Title: () Change () Addition Name: Address: 6915 RED ROAD, STE 215-A Address: () City-St-Zip: Title: VP () Delete Title: () Change () Addition Name: Address: 6915 RED ROAD, STE 215-A Address: () City-St-Zip: Title: VP () Delete Title: () Change () Addition Name: Address: 6915 RED ROAD, STE 215-A Address: () City-St-Zip: Title: VP () Delete Title: () Change () Addition Name: Address: 6915 RED ROAD, STE 215-A Address: () City-St-Zip: Title: VP () Delete Title: () Change () Addition Name: Address: 6915 RED ROAD, STE 215-A Address: () Change () Addition Name: BAHAMDAIN, AL-FASSI K Address: () Change () Addition Name: Address: BAHAMDAIN, AL-FASSI K Address: () Change () Addition Name: Address: (Current P	rincipal Place	of Business:	New Principal Plac	e of Business:
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I hereby certify that the information supplied with this filing does not qualify for the 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 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: TONI H ALAM D 06/30/2005