2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 13, 2006 08:00 AM Secretary of State DOCUMENT #V67309 1. Entity Name TELKAN, INC. Principal Place of Business Mailing Address 255 BAL BAY DR 255 BAL BAY DR BAL HARBOUR, FL 33154 BAL HARBOUR, FL 33154 CR2E034 (11/05) No Cha-P 01302006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0366038 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DO NOT WRITE ELIAS, DEANNA 255 BAL BAY DRIVE BAL HARBOUR, FL 33154 IN THIS SPACE 5. 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. TRUTE: Registered Agent signature required when reinstating) DATE 000000423680 02/22/06-80017-025 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOWII FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE ELIAS, DEANNA MAME STREET ADDRESS 255 BAL BAY DR BAL HARBOR, FL 33154 CITY-ST-78P TITLE NAME STREET ADORESS DO NOT WRITE CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP aliyayayan da araktar da kalaarah araktar araktar bar TITLE NAME STREET ADDRESS CSTY-ST-ZIP TATLE HAME STREET ADDRESS 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 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.

LAMMA CHAS DOA TONA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: A