

**2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Sep 27, 2005  
Secretary of State**

DOCUMENT# 114330

Entity Name: KOMOKO CORPORATION

**Current Principal Place of Business:**

C/O V. W. RICHARDS  
10545 S.W. 52ND TERRACE  
MIAMI, FL 33165

**New Principal Place of Business:**

400 ARTHUR GODFREY ROAD  
SUITE 200  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

C/O V. W. RICHARDS  
10545 S.W. 52ND TERRACE  
MIAMI, FL 33165

**New Mailing Address:**

400 ARTHUR GODFREY ROAD  
SUITE 200  
MIAMI BEACH, FL 33140

FEI Number: 59-6063999

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WILLIAMS, SHARON  
12742 VISTA PINE CIRCLE  
FORT MYERS, FL 33913 US

**Name and Address of New Registered Agent:**

REGISTERED AGENTS OF FLORIDA, LLC  
100 S.E. SECOND STREET  
SUITE 2900  
MIAMI, FL 33131 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: CHARLES J. RENNERT, VICE PRESIDENT

09/27/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: RICHARDS, VANESSA W.,  
Address: 10545 SW 52ND TER  
City-St-Zip: MIAMI, FL

Title: DV ( ) Delete  
Name: WILLIAMS, SHARON L.,  
Address: 12742 VISTA PINE CIRCLE  
City-St-Zip: FORT MYERS, FL 33913

Title: D (X) Delete  
Name: WILLIAMS, CHARLES E.,  
Address: 12742 VISTA PINE CIRCLE  
City-St-Zip: FORT MYERS, FL 33913

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPS (X) Change ( ) Addition  
Name: SHEPPARD, ERIC  
Address: 400 ARTHUR GODFREY ROAD, SUITE 200  
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: DT (X) Change ( ) Addition  
Name: WOLMAN, PHILIP  
Address: 400 ARTHUR GODFREY ROAD, SUITE 200  
City-St-Zip: MIAMI BEACH, FL 33131

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 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: ERIC SHEPPARD

PRES

09/27/2005

Electronic Signature of Signing Officer or Director

Date