

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 10, 2006 8:00 am
Secretary of State

02-10-2006 90034 021 ***150.00

DOCUMENT # F05000004099 1. Entity Name IJS GLOBAL INC.	
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Principal Place of Business 151-04 132ND AVENUE JAMAICA, NY 11434	Mailing Address 151-04 132ND AVENUE JAMAICA, NY 11434
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DO NOT WRITE IN THIS SPACE



01122006 No Chg-P CR2E034 (11/05)

4. FEI Number 11-3292371	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR.
SUITE 4
WESTON, FL 33331

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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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GALLAHAN, JOHN 151-04 132ND AVENUE JAMAICA, NY 11434
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LEMBU, STEVE 151-04 132ND AVENUE JAMAICA, NY 11434
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST ATZBI, MARK 151-04 132ND AVENUE JAMAICA, NY 11434
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C HARTLONG, HENDRICK J JR 8 SOUND SHORE DRIVE, SUITE 265 GREENWICH, CT 06830
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARTNETT, KEVIN 8 SOUND SHORE DRIVE, SUITE 265 GREENWICH, CT 06830
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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.

SIGNATURE:  *Mark Atzbi* 2/6/06 78-276-8500

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