

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002709

FILED
May 16, 2007
Secretary of State

Entity Name: INTERNATIONAL SOCIETY FOR SERVE THE CHILD & ARNAPURNA SERVICE CORPORATION

Current Principal Place of Business:

14000 NW 154TH AVE #23
ALACHUA, FL 32615

New Principal Place of Business:

14000 NW 154TH AVE
23
ALACHUA, FL 32615

Current Mailing Address:

14000 NW 154TH AVE #23
ALACHUA, FL 32615

New Mailing Address:

14000 NW 154TH AVE
23
ALACHUA, FL 32615

FEI Number: 20-2604962 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DELGADO, PAWEL
14000 NW 154TH AVE #23
ALACHUA, FL 32615 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DELGADO, PAWEL CEO
Address: 14000 NW 154TH AVE #23
City-St-Zip: ALACHUA, FL 32615

Title: DV () Delete
Name: DAGLIO, LUCIA
Address: 14000 NW 154TH AVE #14
City-St-Zip: ALACHUA, FL 32615

Title: DS () Delete
Name: DELGADO, PAXEL
Address: 14000 NW 154TH AVE #14
City-St-Zip: ALACHUA, FL 32615

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAWEL DELGADO

D

05/16/2007

Electronic Signature of Signing Officer or Director

Date