2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000108840

Entity Name: ISLAND STYLE ENTERPRISES, INC.

FILED Mar 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

ISLAND STYLE ENT. INC
4244 GULF STREAM RD
4839 POSEIDON PLACE
LAKE WORTH, FL 33461 US
LAKE WORTH, FL 33463 US

Current Mailing Address: New Mailing Address:

ISLAND STYLE ENT. INC
4244 GULF STREAM RD
LAKE WORTH, FL 33461 US
ISLAND STYLE ENTERPRISES, INC
4839 POSEIDON PLACE
LAKE WORTH, FL 33463 US

FEI Number: 20-0286376 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:

MUÑOZ, LUIS A
4244 GULFSTREAM RD
4839 POSEIDON PLACE
LAKE WORTH, FL 33461 US
LAKE WORTH, FL 33463 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: LUIS A MUNOZ 03/05/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 MUÑOZ, LUIS A
 Name:
 MUÑOZ, LUIS A

 Address:
 4244 GULFSTREAM RD
 Address:
 4839 POSEIDON PLACE

 City-St-Zip:
 LAKE WORTH, FL 33461
 City-St-Zip:
 LAKE WORTH, FL 33463 US

Title: D () Delete Title: VP (X) Change () Addition

 Name:
 ANTUNEZ, RAMON
 Name:
 MUNOZ, DARIO E

 Address:
 4705 KELLY DR
 Address:
 4839 POSEIDON PLACE

 City-St-Zip:
 WEST PALM BEACH, FL 33415
 City-St-Zip:
 LAKE WORTH, FL 33463 US

Title: Title: () Delete (X) Change () Addition NUNEZ, OVIDIO RODRIGUEZ, FERNANDO A Name: Name: 4705 CHARIOT CIR 4839 POSEIDON PLACE Address: Address: City-St-Zip: GREENACRES, FL 33463 City-St-Zip: LAKE WORTH, FL 33463 US

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUIS A MUNOZ P 03/05/2007