

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000101644

Entity Name: ISOURCE MARKETING INC.

FILED  
Jul 13, 2006  
Secretary of State

**Current Principal Place of Business:**

3205 NE 184 STREET #9206  
N MIAMI, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

3205 NE 184 STREET #9206  
N MIAMI, FL 33160

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

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

CAST, LOUIS F  
4805 NW 79 AVE #9  
DORAL I, FL 33166      US

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

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title:                      PS                      ( ) Delete  
Name:                      LISJAK, ELEONORA  
Address:                      3205 NE 184 STREET #9206  
City-St-Zip:                      N MIAMI, FL 33160

Title:                      VT                      ( ) Delete  
Name:                      OCHOA, CAROLINA  
Address:                      3205 NE 184 STREET #9206  
City-St-Zip:                      N MIAMI, FL 33160

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

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

Title:                      VT                      (X) Change ( ) Addition  
Name:                      ARIEL, LISJAK  
Address:                      3205 NE 184 STREET #9206  
City-St-Zip:                      N MIAMI, FL 33160

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: ARIEL

VT

07/13/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date