2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2008
Secretary of State

DOCUMENT# N05000010062

Entity Name: INVICTA CARE FOUNDATION, INC.

Current Principal Place of Business:

3069 TAFT STREET
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

3069 TAFT STREET
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 20-2005239 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FELDMAN, PAUL
3069 TAFT STREET
HOLLYWOOD, FL 33021 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

OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete
Name: LALO, EYAL
Address: 3069 TAFT STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: VD ( ) Delete
Name: LALO, KAREN
Address: 3069 TAFT STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: TD ( ) Delete
Name: COHEN, GANY
Address: 3069 TAFT STREET
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change ( ) Addition
Name: LALO, KEREN
Address: 3069 TAFT STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: TD (X) Change ( ) Addition
Name: COHEN, GANY LALO
Address: 3069 TAFT STREET
City-St-Zip: HOLLYWOOD, FL 33021

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: EYAL LALO P 01/11/2008

Electronic Signature of Signing Officer or Director — Date