

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H73424

Entity Name: I & S MANAGEMENT, INC.

FILED
Feb 11, 2009
Secretary of State

Current Principal Place of Business:

2880 W. OAKLAND PARK BLVD.
#118
FT LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

2880 W. OAKLAND PARK BLVD.
#118
FT LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 59-2583119

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHOCKER, SUSANNA
2880 W OAKLAND PARK BLVD STE 118
FORT LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

SCHMOCKER, SUSANNA
2880 W OAKLAND PARK BLVD STE 118
FORT LAUDERDALE, FL 33311 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: SUSANNA SCHMOCKER

02/11/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHMOCKER, SUSANNA
Address: 2880 W. OAKLAND PARK BLVD. SUITE 118
City-St-Zip: FT. LAUDERDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCHMOCKER, SUSANNA
Address: 2880 W. OAKLAND PARK BLVD. SUITE 118
City-St-Zip: FT. LAUDERDALE, FL 33311

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSANNA SCHMOCKER

PRES

02/11/2009

Electronic Signature of Signing Officer or Director

Date