

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J74994

Entity Name: I.S.S. AMERICA, INC.

FILED
Aug 30, 2004
Secretary of State

Current Principal Place of Business:

1701 S FLAGLER DRIVE
APT 1509
W PALM BEACH, FL 33401 US

Current Mailing Address:

P. O. BOX 2801
PALM BEACH, FL 33480 US

New Principal Place of Business:

1701 S FLAGLER DRIVE
APT 602
W PALM BEACH, FL 33401 US

New Mailing Address:

FEI Number: 59-2804691 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SEYMOUR, CAROLINE
1701 S FLAGLER DRIVE
APT 1509
W PALM BEACH, FL 33401 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WALTHUIS, ALLARD,
Address: 1701 S FLAGLER DRIVE #1509
City-St-Zip: W PALM BEACH, FL

Title: CV () Delete
Name: SEYMOUR, CAROLINE,
Address: 1701 S FLAGLER DRIVE #1509
City-St-Zip: W PALM BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 for the exemption stated in Section 119.07(3)(i), 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: CAROLINE C SEYMOUR

CV

08/30/2004

Electronic Signature of Signing Officer or Director

Date