

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004777

Entity Name: I.O.G.K.F. - U.S.A., INC.

FILED
Mar 20, 2006
Secretary of State

Current Principal Place of Business:

212 STEEPLECHASE CIR.
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

212 STEEPLECHASE CIR.
SANFORD, FL 32771

New Mailing Address:

FEI Number: 59-3737809

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYONS, JOHN P
212 STEEPLECHASE CIR.
SANFORD, FL 32771 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: PD () Delete
Name: PELED, MIKO
Address: 323 B AVE
City-St-Zip: CORONADO, CA 92118

Title: VD () Delete
Name: LYONS, JOHN P
Address: 212 STEEPLECHASE CIR.
City-St-Zip: SANFORD, FL 32771

Title: D () Delete
Name: LYONS, ROBIN E
Address: 212 STEEPLECHASE CIR.
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: JOHN LYONS

SEC

03/20/2006

Electronic Signature of Signing Officer or Director

Date