

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 05, 2005
Secretary of State

DOCUMENT# N04000004901

Entity Name: BRISKELL CORPORATION

Current Principal Place of Business:

1555 SW 109 AVE #203
PEMBROKE PINES, FL 33025

New Principal Place of Business:

Current Mailing Address:

1555 SW 109 AVE #203
PEMBROKE PINES, FL 33025

New Mailing Address:

FEI Number: 68-0586102 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PEREZ, MICHAEL
10126 W FLAGLER STREET
MIAMI, FL 33174 US

Name and Address of New Registered Agent:

SAMSON, OBINWA
1555 SW 109 AVE
#203
PEMBROKE PINES, FL 33025 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: SAMSON OBINWA

09/05/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OBINWA, SAMSON
Address: 1555 SW 109 AVE #203
City-St-Zip: PEMBROKE PINES, FL 33025

Title: V () Delete
Name: OKAFOR, GODFREY
Address: 1655 W 146 STREET #B
City-St-Zip: GARDENA, CA 90247

Title: T () Delete
Name: UNUIGBOJE, CATHERINE
Address: 1555 SW 109 AVE #203
City-St-Zip: PEMBROKE PINES, FL 33025

Title: S () Delete
Name: OKAFOR, ADAEZE
Address: 13658 HAWTHORNE BLVD #200A
City-St-Zip: HAETHORNE, CA 90250

Title: C () Delete
Name: OBINWA, IKE
Address: CHEVRON NIGERIA
City-St-Zip: LAGOS NIGERIA,

Title: MC () Delete
Name: OBINWA, UCHE
Address: MALAGA
City-St-Zip: SPAIN,

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:

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

SIGNATURE: SAMSON OBINWA

P

09/05/2005

Electronic Signature of Signing Officer or Director

Date