## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000005349

Entity Name: ISHI, INC.

FILED Jul 08, 2006 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

4303 NORTHWEST 202ND STREET
MIAMI, FL 33055

4303 NORTHWEST 202ND STREET
MIAMI GARDENS, FL 33055 US

Current Mailing Address: New Mailing Address:

4303 NORTHWEST 202ND STREET
MIAMI, FL 33055

4303 NORTHWEST 202ND STREET
MIAMI GARDENS, FL 33055 US

FEI Number: 20-1293470 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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: Name and Address of New Registered Agent:

LONG, HAROLD JR 99 NORTHWEST 193RD STREET SUITE 127 NORTH MIAMI BEACH, FL 33169 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:

Clarkers is Circusture of Decistors of Asset

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

Name:HUZZIE, DONALDName:HUZZIE, DONALD L SR.Address:4303 NORTHWEST 202ND STREETAddress:4303 NORTHWEST 202ND STREET

City-St-Zip: MIAMI, FL 33055 City-St-Zip: MIAMI GARDENS, FL 33055 US

Title: SD ( ) Delete Title: SD (X) Change ( ) Addition

Name: HUZZIE, ELAINE Name: HUZZIE, ELAINE M
Address: 4303 NORTHWEST 202ND STREET Address: 4303 NORTHWEST 202ND STREET

City-St-Zip: MIAMI, FL 33055 City-St-Zip: MIAMI GARDENS, FL 33055 US

Title: TD ( ) Delete Title: TD (X) Change ( ) Addition Name: HERRIOTT, ANN T Name: HERRIOTT, ANN T

Address: 17530 N.W. 18TH AVENUE Address: 17530 N.W. 18TH AVENUE City-St-Zip: MIAMI, FL 33056 City-St-Zip: MIAMI, FL 33056 MIAMI GARDENS, FL 33056 US

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: DONALD L. HUZZIE SR. PD 07/08/2006