

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 25, 2005
Secretary of State**

DOCUMENT# N04000010532

Entity Name: I.P.A.T.C.H., INC.

Current Principal Place of Business:

626 EUCLID AVENUE
#1
MIAMI BEACH, FL 33139

New Principal Place of Business:

61 COLLINS AVE
302
MIAMI BEACH, FL 33139

Current Mailing Address:

626 EUCLID AVENUE
#1
MIAMI BEACH, FL 33139

New Mailing Address:

61 COLLINS AVE
302
MIAMI BEACH, FL 33139

FEI Number: 75-3173774 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARO, BERNARDITA A
418 EUCLID AVENUE
#2B
MIAMI BEACH, FL 33139 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: D () Delete
Name: JACKSON, CARMELA D
Address: 626 EUCLID AVENUE #1
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: JACKSON, RENATA N
Address: 1800 LONG CREEK DR 11L
City-St-Zip: COLUMBIA, SC 29210

Title: D () Delete
Name: JACKSON, CARMEN R
Address: 712 PINWOOD DRIVE
City-St-Zip: JACKSONVILLE, NC 28540

Title: D () Delete
Name: CLARO, BERNARDITA
Address: 418 EUCLID AVENUE #2B
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JACKSON, CARMELA D
Address: 61 COLLINS AVE #302
City-St-Zip: MIAMI BEACH, FL 33139

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: CARMELA D JACKSON

D

04/25/2005

Electronic Signature of Signing Officer or Director

_____ Date