

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N94000002711

FILED
Sep 08, 2003
Secretary of State

Entity Name: IQ'VOT YESHUA HAMASHIACH, INC.

Current Principal Place of Business:

5989 S FEDERAL HWY
FORT PIERCE, FL 34982

New Principal Place of Business:

Current Mailing Address:

PO BOX 12475
FORT PIERCE, FL 34982

New Mailing Address:

FEI Number: 65-0479993

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETRIC, LISA A
5989 S. FEDERAL HWY
PORT SAINT LUCIE, FL 34987

Name and Address of New Registered Agent:

PETRIE, LISA A
5989 S. FEDERAL HWY
FORT PIERCE, FL 34987

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: LISA A PETRIE

09/08/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: PETRIE, LISA A
Address: 5989 S. FEDERAL HWY
City-St-Zip: FORT PIERCE, FL 34987

Title: VPT () Delete
Name: VALDES, JOANNE L
Address: 2488 NE GINGER TERRACE
City-St-Zip: JENSEN BEACH, FL 34957

Title: D (X) Delete
Name: PELOFI, PHILIPPE
Address: 4600 AMHERST CIRCLE #80
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D (X) Delete
Name: PETRIE, GEORGE E
Address: 5989 S. FEDERAL HWY
City-St-Zip: FORT PIERCE, FL 34987

Title: D () Delete
Name: PETRIE, GEORGE M
Address: 501 ULRICH ROAD
City-St-Zip: FORT PIERCE, FL 34982

Title: D () Delete
Name: ANDERSON, LOLA
Address: 30520 CEDAR DRIVE
City-St-Zip: BURLINGTON, WI 53105

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: LISA A. PETRIE

PS

09/08/2003

Electronic Signature of Signing Officer or Director

Date