

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004226

FILED
Apr 28, 2008
Secretary of State

Entity Name: DIWATCH INTERNATIONAL FOUNDATION, INC.

Current Principal Place of Business:

6430 MELALEUCA LANE
GREENACRES, FL 33463 US

New Principal Place of Business:

Current Mailing Address:

6430 MELALEUCA LANE
GREENACRES, FL 33463 US

New Mailing Address:

FEI Number: 52-1560046

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VASHIST, PARMA N
1632 39TH STREET
LAKE WORTH, FL 33460 US

Name and Address of New Registered Agent:

DIVERSIFIED PROFESSIONAL SERVICE ASSOCIATE
6430 MELALEUCA LANE
GREENACRES, FL 33463 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: MARK A LOBEL

04/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: VASHIST, PARMA N
Address: 1632 39TH STREET
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D () Delete
Name: CRENSHAW, KENNETH B
Address: 1555 PALM BCH LAKES BLVD STE 920
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D () Delete
Name: LOBEL, MARK
Address: 6430 MELALEUCA LANE
City-St-Zip: GREENACRES, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BROUSSARD, ARNOLD A
Address: 6430 MELALEUCA LANE
City-St-Zip: GREENACRES, FL 33463

Title: D (X) Change () Addition
Name: CRENSHAW, KENNETH B
Address: 6430 MELALEUCA LANE
City-St-Zip: GREENACRES, FL 33463

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

I hereby certify that the information supplied with this filing does not qualify 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: MARK A LOBEL

D

04/28/2008

Electronic Signature of Signing Officer or Director

Date