2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004
Secretary of State

DOCUMENT# N98000005639

Entity Name: INTERNATIONAL ACADEMY OF VOICE AND STAGE INCORPORATED

Current Principal Place of Business:

1 SW 58 AVE.
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

1 SW 58 AVE.
PLANTATION, FL 33317

New Mailing Address:

FEI Number: 65-0862355 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JUMPING JAX TAX, INC.
1940 HARRISON STREET
STE 201 B
HOLLYWOOD, FL 33020 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: JADKEIROWICZ, MIRIAM
Address: 1 SW 58 AVE.
City-St-Zip: PLANTATION, FL 33327

Title: D ( ) Delete
Name: MALERBA, JOHN J EA
Address: 1940 HARRISON STREET STE 201B
City-St-Zip: HOLLYWOOD, FL 33020

Title: D ( ) Delete
Name: NEILSON, JUDY A REV
Address: 1940 HARRISON STREET STE 201B
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: ARMAN JASKEIROWICZ, MIRIAM
Address: 1 SW 58 AVE.
City-St-Zip: PLANTATION, FL 33327

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: MIRIAM JASKIEROWICZ ARMAN DR. 04/28/2004

Electronic Signature of Signing Officer or Director — Date