

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000031091

FILED
Mar 24, 2003
Secretary of State

Entity Name: ITM HOLDINGS CORPORATION

Current Principal Place of Business:

29 SIMONTON CIRCLE
FORT LAUDERDALE, FL 33326

New Principal Place of Business:

Current Mailing Address:

29 SIMONTON CIRCLE
FORT LAUDERDALE, FL 33326

New Mailing Address:

FEI Number: 65-0999049

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

MOYERS, IVONNE R DIRECTO
29 SIMONTON CIRCLE
WESTON, FL 33326 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: IVONNE MOYERS

03/24/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MOYERS, IVONNE
Address: POST OFFICE BOX 266
City-St-Zip: HALLANDALE, FL 33008

Title: D () Delete
Name: MOYERS, TONY
Address: POST OFFICE BOX 266
City-St-Zip: HALLANDALE, FL 33008

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IVONNE MOYERS

D

03/24/2003

Electronic Signature of Signing Officer or Director

Date