

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000034792

1. Entity Name
SCHISM CORPORATION



FILED

05 APR 12 AM 10:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
201 S BISCAYNE BOULEVARD
SUITE 1500
MIAMI, FL 33131

Mailing Address
201 S BISCAYNE BOULEVARD
SUITE 1500
MIAMI, FL 33131

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03152005

Chg-P

CR2E034 (10/03)

4. FEI Number
65-1097790

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION COMPANY OF MIAMI
201 S. BISCAYNE BLVD.
SUITE 1500
MIAMI, FL 33131

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when relinquishing)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSTD
SAINZ CASTRO, KHRISTIAN
% RJS 201 S BISCAYNE BLVD #1500
MIAMI, FL 33131



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
000054004290
05/06/05--01047--020 **158.75



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPT
Julie Robinson
Deutsche Fiduciary Services
Place de Bergues



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Case Postale 1416
CH-1211 Geneve 1, Switzerland



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVS
Alan Edwards
Deutsche Fiduciary Services
Place de Bergues



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Case Postale 1416
CH-1211 Geneve 1, Switzerland



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President VICE President

30 March 2005 +4122 7396611

Date

Daytime Phone #