2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000107445

Title:

Name:

Address:

City-St-Zip:

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PEMBROKE PINES, FL 33027

ZIPPER, JOSEPH S

1471 LA COSTA DR E

FILED Jan 26, 2004 Secretary of State

20011		1000107110		ocorciary or otate		
Entity Nai	me: I&S ENT	ERPRISES OF JACKSONV	ILLE INC.			
Current Principal Place of Business:			New Prin	New Principal Place of Business:		
	SH LANDING F VILLE BEACH					
Current Mailing Address:			New Mail	New Mailing Address:		
	SH LANDING F VILLE BEACH					
FEI Number: 59-3757233 FEI Number Applied For ()		FEI Number Not App	FEI Number Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent: Name and Address of New				d Address of New Registered Agent:		
	(EITH J BH LANDING F IVILLE BEACH					
	named entity e of Florida.	submits this statement for t	he purpose of changing	its registered office or registered agent, or both,		
SIGNATUR	RE:					
	Electro	nic Signature of Registered	Agent	Date		
Election Car	mpaign Financir	ng Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	ZIPPER, BETS 12346 PEACH) Delete SEY ORCHARD DR LE BEACH, FL 32223	Title: Name: Address: City-St-Zip:	D (X) Change () Addition ZIPPER, BETSEY 1433 S. BURGANDY TRAIL JACKSONVILLE, FL 32259		
Title: Name: Address: City-St-Zip:	ZIPPER, KEIT 12346 PEACH) Delete H ORCHARD DR E BEACH, FL, 32223	Title: Name: Address: Citv-St-Zin:	D (X) Change () Addition ZIPPER, KEITH 1433 S. BURGANDY TRAIL JACKSONVILLE, FL 32259		

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: KEITH J. ZIPPER MR. 01/26/2004

() Change () Addition