

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000014572

FILED
Feb 06, 2006
Secretary of State

Entity Name: INTERNATIONAL SWIM SCHOOLS, INC.

Current Principal Place of Business:

6861 SW 96 AVE
#405
PEMBROKE PINES, FL 33332

New Principal Place of Business:

Current Mailing Address:

2084 N. UNIVERSITY DR.
SUNRISE, FL 33322

New Mailing Address:

FEI Number: 90-0008526

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDBERG, HENRIETTA
2084 N. UNIVERSITY DR.
SUNRISE, FL 33322 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GOLDBERG, HENRIETTA
Address: 692 KENSINGTON PLACE
City-St-Zip: WILSON MANORS, FL 33305

Title: D () Delete
Name: GARCES, LILIANA
Address: 1530 SW 191ST TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: WHITE, ANTONY
Address: 2651 SOUTH COURSE DRIVE #604
City-St-Zip: POMPANO BEACH, FL 33069

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTONY WHITE

D

02/06/2006

Electronic Signature of Signing Officer or Director

Date