

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P02000093108

1. Entity Name  
ISOGRAN USA, INC.



**FILED**  
**Mar 28, 2005 08:00 AM**  
**Secretary of State**

Principal Place of Business

1306 OMAHA STREET  
PALM HARBOR, FL 34683

Mailing Address

1306 OMAHA STREET  
PALM HARBOR, FL 34683



03112005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

52-2376102

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

KOUJZER, MARIA  
1306 OMAHA STREET  
PALM HARBOR, FL 34683

**DO NOT WRITE  
IN THIS SPACE**

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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

U000000278748  
03/28/05-80040-001 150.00

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME KOUJZER, MARIA  
STREET ADDRESS 1306 OMAHA STREET  
CITY-ST-ZIP PALM HARBOR, FL 34683

TITLE VD  
NAME KOUJZER, J A  
STREET ADDRESS 1306 OMAHA STREET  
CITY-ST-ZIP PALM HARBOR, FL 34683

TITLE VD  
NAME KOUJZER, ARJAN  
STREET ADDRESS 12303 HOLLOW STUMP ROAD  
CITY-ST-ZIP TAMPA, FL 33637

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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IN THIS SPACE**

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: *M Koujzer Ekhout*

*3/25/05*