

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000054719

FILED  
Feb 20, 2008  
Secretary of State

Entity Name: ISTER, INC.

**Current Principal Place of Business:**

1843 WILEY STREET  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

**Current Mailing Address:**

1843 WILEY STREET  
HOLLYWOOD, FL 33020

**New Mailing Address:**

FEI Number: 55-0894331      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RENALDO, ALEX A  
137 GOLDEN ISLES DRIVE #301  
HALLANDALE, FL 33009      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: P ( ) Delete  
Name: ISUTIN, GENNADI  
Address: 1843 WILEY STREET  
City-St-Zip: HOLLYWOOD, FL 33020

Title: T ( ) Delete  
Name: STERN, AGNES  
Address: 1843 WILEY STREET  
City-St-Zip: HOLLYWOOD, FL 33020

**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 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: ISUTIN GENNADI

PRES

02/20/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date