2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# P07000074308

Entity Name: ISAACOVA, INC.

Current Principal Place of Business:

304 RACHELLE AVE
APT 322
SANFORD, FL 32771 US

New Principal Place of Business:

704 CREEKWATER TER
APT 204
LAKE MARY, FL 32746 US

Current Mailing Address:

304 RACHELLE AVE
APT 322
SANFORD, FL 32771 US

New Mailing Address:

704 CREEKWATER TER
APT 204
LAKE MARY, FL 32746 US

FEI Number: 26-0265294 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

USA-RA LLC
873 WEST BAY DRIVE
SUITE 105
LARGO, FL 33770 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: ISAAC, GABRIELA
Address: 304 RACHELLE AVE, APT 322
City-St-Zip: SANFORD, FL 32771 US

Title: S,T ( ) Delete
Name: ISAAC, OMAR A
Address: 304 RACHELLE AVE, APT 322
City-St-Zip: SANFORD, FL 32771 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ISAAC, GABRIELA
Address: 704 CREEKWATER TER 204
City-St-Zip: LAKE MARY, FL 32746 US

Title: S,T (X) Change ( ) Addition
Name: ISAAC, OMAR A
Address: 704 CREEKWATER TER 204
City-St-Zip: LAKE MARY, FL 32746 US

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: GABRIELA ISAAC P 04/23/2009

Electronic Signature of Signing Officer or Director Date