2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10090

ntity Name: NETAFIM IRRIGATION, INC.

FILED Jun 26, 2007 Secretary of State

Entity Name: NETAFIM IRRIGATION, INC.							
Current Principal Place of Business:			New Principal Place of Business:				
5470 E HOI FRESNO, (US					
Current Mailing Address:			New Mailing Address:				
	ECTOR OF F ME AVENUE CA 93727						
FEI Number:	11-2580327	FEI Number Applied For ()	FEI Number Not Ap	plicable ()	Certificate of Status Desi	red ()	
Name and	Address of C	Current Registered Agent:	Name an	Name and Address of New Registered Agent:			
NATIONAL CORPORATE RESEARCH,LTD., INC. 515 E. PARK AVE. TALLAHASSEE, FL 32301 US							
The above in the State		submits this statement for the pu	rpose of changing	its registered	office or registered agen	t, or both,	
SIGNATURE:							
Electronic Signature of Registered Agent					Date		
Election Cam	paign Financing	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PCEO () AISENBERG, IO 5470 E HOME FRESO, CA 93	AVE	Title: Name: Address: City-St-Zip:	,			
Title: Name: Address: City-St-Zip:	MELTZER, ERI % KIBBUTZ HA		Title: Name: Address: City-St-Zip:	CD (2 BLOCH, OFEI 161 ARLOZOI TEL AVIV, NA	ROV STREET		

 Title:
 T
 () Delete

 Name:
 HARPER, ALAN W T

 Address:
 5470 E HOME AVE

 City-St-Zip:
 FRESNO, CA 93727 US

 Title:
 S
 () Delete

 Name:
 BARTFELD, PETER M S

 Address:
 685 THIRD AVE.

 City-St-Zip:
 NEW YORK, NY 10017 US

Title: VP (X) Delete
Name: WHITE, JON P VP

 Name:
 WHITE, JON P VP

 Address:
 5470 E HOME AVE

 City-St-Zip:
 FRESNO, CA 93727 US

City-St-Zip: NEW YORK, NY 10017 US

685 THIRD AVE.

HARPER, ALAN W TS

FRESNO, CA 93727 US

BARTFELD, PETER M AS

5470 E HOME AVE

(X) Change () Addition

(X) Change () Addition

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

AS

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.

Title:

Title:

Name:

Address:

Name:

Address:

City-St-Zip:

SIGNATURE: ALAN W HARPER TS 06/26/2007