

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000014687

Entity Name: ISMENE INC.

FILED
Apr 18, 2006
Secretary of State

Current Principal Place of Business:

2200 N. COMMERCE PARKWAY
SUITE 300
WESTON, FL 33326 US

New Principal Place of Business:

Current Mailing Address:

C/O STEVEN K. ARONOFF, PC
499 PARK AVENUE, 6TH FLOOR
NEW YORK, NY 10022 US

New Mailing Address:

FEI Number: 65-0376445

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, JUAN F
2200 NORTH COMMERCE PARKWAY
SUITE 300
WESTON, FL 33326 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: PSD () Delete
Name: JAHARIS, KATHRYN
Address: C/O OIKOS VENTURES, LLC 499 PARK AVE.
City-St-Zip: NEW YORK, NY 10022

Title: VTD () Delete
Name: JAHARIS, STEVEN
Address: C/O OIKOS VENTURES, LLC 499 PARK AVE.
City-St-Zip: NEW YORK, NY 10022

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 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: KATHRYN JAHARIS

PRES

04/18/2006

Electronic Signature of Signing Officer or Director

Date