

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000027564

Entity Name: I S S, INC.

FILED
Feb 15, 2008
Secretary of State

Current Principal Place of Business:

1000 SOUTH PINE ISLAND ROAD, #800
PLANTATION, FL 33324 US

New Principal Place of Business:

Current Mailing Address:

1000 SOUTH PINE ISLAND ROAD, #800
#800
PLANTATION, FL 33324 US

New Mailing Address:

1000 SOUTH PINE ISLAND ROAD, #800
PLANTATION, FL 33324 US

FEI Number: 65-0483536

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: DP () Delete
Name: ALLISON, JOHN
Address: 1000 S. PINE ISLAND RD., #800
City-St-Zip: PLANTATION, FL 33324 US

Title: VPAS () Delete
Name: KARAWAN, HOWARD
Address: 1000 S. PINE ISLAND RD., #800
City-St-Zip: PLANTATION, FL 33324

Title: S () Delete
Name: MURTHA, WILLIAM C
Address: 2106 NEWROAD, C7
City-St-Zip: LINWOOD, NJ 08221

Title: DVP (X) Delete
Name: LEVINE, RICHARD M
Address: 730 5TH AVE 5TH FLOOR
City-St-Zip: NEW YORK, NY 10019

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BIUMI, BONNIE
Address: 1000 S. PINE ISLAND RD., #800
City-St-Zip: PLANTATION, FL 33324 US

Title: DVP (X) Change () Addition
Name: LEVINE, RICHARD M
Address: 703 FIFTH AVENUE, 5TH FLOOR
City-St-Zip: NEW YORK, NY 10019

Title: S (X) Change () Addition
Name: MURTHA, WILLIAM C
Address: 1000 SOUTH PINE ISLAND RDL #800
City-St-Zip: PLANTATION, FL 33324

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: BONNIE BIUMI

DP

02/15/2008

Electronic Signature of Signing Officer or Director

_____ Date