

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

80045322

DOCUMENT # P94000084520 1. Entity Name IDON GROUP CORPORATION		
Principal Place of Business 9950 E. BAY HARBOR DRIVE SUITE 1 MIAMI, FL 33154 US		Mailing Address 9950 E. BAY HARBOR DRIVE SUITE 1 MIAMI, FL 33154 US
2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	
Zip	Country	Zip
		Country
4. FEI Number 65-8439168		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent SCHOR, NATHAN 9950 E. BAY HARBOR DRIVE SUITE 1 MIAMI, FL 33164		7. Name and Address of New Registered Agent
		Name
		Street Address (P.O. Box Number Is Not Acceptable)
		City
		FL Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE: <u>Nathan Schor</u> DATE: _____		
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCHOR, NATHAN 9950 EAST BAY HARBOR DR. #1 MIAMI, FL 33164	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Nathan Schor</u>		



CHECK HERE IF MAKING CHANGES

CRREC034 (1/02)