

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90146 010 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

80098591

DOCUMENT # P98000048278			
1. Entity Name I.H.P.M., INC.			
Principal Place of Business 30 CAMP CREEK RD., APT. 1 SANTA ROSA BEACH, FL 32459 US		Mailing Address 30 CAMP CREEK RD., APT. 1 SANTA ROSA BEACH, FL 32459 US	
2. Principal Place of Business		3. Mailing Address P.O. Box 4731	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State Seaside, Florida	
Zip	Country	Zip	Country
32459			
4. FEI Number 59-3577642		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent COFFIELD, P C 1719 S. CO. HIGHWAY 393 SANTA ROSA BEACH, FL 32459		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 _____ (NOTE: Registered Agent's signature required when releasing) DATE _____			
9. Election Campaign Financing Trust Fund Contribution. ☐		\$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	D MORI, AKIRA 30 CAMP CREEK RD., APT. 1 SANTA ROSA BEACH, FL 32459 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST ERCK, MAI 30 CAMP CREEK RD., APT. 1 SANTA ROSA BEACH, FL 32459 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ERCK, JORN P 30 CAMP CREEK RD., APT. 1 SANTA ROSA BEACH, FL 32459 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ERCK, SUEN GREEN STREET, 14B SANTA ROSA BEACH, FL 32459 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ERCK, SIEGMUND DORFSTR. 21 SONNEN DORF GERMANY D-99188, ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, 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>JORN P. ERCK</u>		04/24/03 850-231-2703	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	