-2008 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Feb 19, 2008 08:00 A Secretary of State **DOCUMENT # P98000063738** INTERNATIONAL SEARCH CORP. Principal Place of Business Mailing Address 325 NORTH BROOKE DRIVE 325 NORTH BROOKE DRIVE CANTON, GA 30114 CANTON, GA 30114 02152008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3524573 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KORTA, JACK DO NOT WRITE 14502 N. DALE MABRY HWY 2ND FLOOR IN THIS SPACE TAMPA, FL 33618 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent aignature required when reinstating) U00000833303 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 02/28/08-80007-016 150.00 m Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE GERMAN, BRUCE NAME STREET ADDRESS 325 NORTH BROOKE DRIVE CITY-ST-ZIP **CANTON, GA 30114** TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS