

**2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P98000082691

**FILED**  
**Jul 12, 2006**  
**Secretary of State****Entity Name:** INTERNATIONAL SOLUBLES CORPORATION**Current Principal Place of Business:**974 EXPLORER COVE  
140  
ALTAMONTE SPRINGS, FL 32701**New Principal Place of Business:****Current Mailing Address:**974 EXPLORER COVE  
140  
ALTAMONTE SPRINGS, FL 32701**New Mailing Address:****FEI Number:** 59-3540912**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BODDEN, CLIFFE R  
514 RIO MAR AVE  
ORLANDO, FL 32828 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

**OFFICERS AND DIRECTORS:****Title:** S ( ) Delete  
**Name:** BODDEN, CLIFFE R  
**Address:** 514 RIO MAR AVE  
**City-St-Zip:** ORLANDO, FL 32828**Title:** P ( ) Delete  
**Name:** DITTMAN, ROBERT L  
**Address:** 2612 WHITE MAGNOLIA WAY  
**City-St-Zip:** SANFORD, FL 32771**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** .P (X) Change ( ) Addition  
**Name:** .SARMIRNTO, .HENRY L  
**Address:** 952 LAKE DESTINY DRIVE SUITE F  
**City-St-Zip:** ALTAMONTE SPRINGS, FL 32701

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: CLIFFE BODDEN

S

07/12/2006

Electronic Signature of Signing Officer or Director

Date