2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S66528

FALCON, ALÈX

MIAMI, FL 33169

20950 NW 2 AVENUE

Name: Address:

City-St-Zip:

Entity Name: WILLIAM LEHMAN ISUZU, INC

FILED Jan 27, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
20950 N.W MIAMI, FL	. 2ND AVEN 33169	JE		
Current Mailing Address:			New Mailing Address:	
20950 N.W MIAMI, FL	. 2ND AVEN 33169	JE		
FEI Number:	65-0275620	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of	Current Registered Agent:	Name and Address of	New Registered Agent:
LEHMAN J 21400 N.W MIAMI, FL				
The above in the State		submits this statement for the	purpose of changing its registered	office or registered agent, or both,
SIGNATUR	RE:			
	Electro	nic Signature of Registered Ag	ent	Date
Election Carr	npaign Financir	ng Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	DP (LEHMAN, WIL 21400 N.W. 2I MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	T (ROKNICK, DC 20950 N.W. 2I MIAMI, FL 33	ND AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VPSD (ROSENBLATT 21200 N.W. 2I MIAMI, FL 33	ND AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	VP () Delete	Title:	() Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: IRA M ROSENBLATT VP 01/27/2009