2002 Uniform Business Report (UBR)

DOCUMENT # V17863 1. Entity Name IZERWAREN, INC.					Secretary of State 04-07-2002 90042 002 ***150.00			
Principal Place of Business 2207 S ANDREWS AVE FORT LAUDERDALE FL 33316 US		Mailing Address 2207 S ANDREWS AVE FORT LAUDERDALE FL 33316 US						
2. Principal F	Place of Business	3. Mailing Address	iling Address					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City & State		4.	FEI Number 65-0320989		oplied For ot Applicable	
Zip	Country	Zip	Country	5.	Certificate of Status Desired	\$8.75 Add	itional	
	6. Name and Address of Current I	Registered Agent		7.	Name and Address of New Registered	Agent		
3325 GRIF STE 34 FT. LAUD	ERDALE FL 33312		Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Andrew Avenue Fort. Lauderdale, FL 33316 City FL Zip Code egistered office or registered agent, or both, in the State of Florida.					
SIGNATURE 9. This corpo	Signature, typed or printed name of registered agent a praction is engible to satisfy its Intangible requirement and elects to do so.	leevsley (NOTE:	Registered Agent signature relatives in the second signature relative relat	equired when n	einstating) DATE 10. Election Campaign Financing		O May Be	
(See criteria on back)			e to Department of	f State			I to Fees	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TACKENBERG, HENDRIK 100 SE 18 COURT FORT LAUDERDALE FL	Delete	NAME STREET ADDRESS	rodrik 90 iz	Tactenbers Iton Road, # 1810 ii, FL 33139	DIRECTORS Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD PFOTENHAUER, INGO 100 SE 18 COURT FORT LAUDERDALE FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	S TACKENBERG, ELIZABETH 100 SE 18 COURT FORT LAUDERDALE FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	nicabi Miam	eth-Tackenbas on Road, # 1810 i, FL 33139	Change _	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
indicatéd of the cor	on this report or supplemental report is	true and accurate and that movered to execute this report a	y signature shall have	the same	119.07(3)(i), Florida Statutes. I further cer legal effect as if made under oath; that I da Statutes; and that my name appears i	am an officer	or director	

PHENDEN LACKENBERG