

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000005025

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: INTERNATIONAL IMMIGRATION ASSISTANCE, INC.

**Current Principal Place of Business:**

6289 WEST SUNRISE STE 114  
SUNRISE, FL 33313

**New Principal Place of Business:**

6289 WEST SUNRISE BLVD  
114  
SUNRISE, FL 33313

**Current Mailing Address:**

6289 WEST SUNRISE STE 114  
SUNRISE, FL 33313

**New Mailing Address:**

6289 WEST SUNRISE BLVD  
114  
SUNRISE, FL 33313

FEI Number: 65-1077733

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

O'BERG, MARIA P  
2503 NE 15TH STREET  
POMPANO BEACH, FL 33062 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: CARDONA, XIMENA L  
Address: 6289 WEST SUNRISE STE 114  
City-St-Zip: SUNRISE, FL 33313

Title: DO ( ) Delete  
Name: GALVEZ, EDUARDO  
Address: 7656 NW 74 AVE  
City-St-Zip: TAMARAC, FL 33321

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: XIMENA LOPEZ

PSDT

04/30/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date