

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 538739

FILED
Apr 15, 2005
Secretary of State

Entity Name: INTERNATIONAL INVESTMENTS OF AMERICA, INC.

Current Principal Place of Business:

PO BOX 480760
FT LAUDERDALE, FL 33348 US

New Principal Place of Business:

511 E. SAN YSIDRO BLVD
C-156
SAN YSIDRO, CA 92173 US

Current Mailing Address:

511 E. SAN YSIDRO BLVD
C-156
SAN YSIDRO, CA 92173 US

New Mailing Address:

FEI Number: 59-1766041 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SCHNEIDER, REUBEN
2021 TYLER ST
HOLLYWOOD, FL 33022 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: PD () Delete
Name: MOREL, PIERRE,
Address: PO BOX 480760
City-St-Zip: FT LAUDERDALE, FL 33348

Title: VST () Delete
Name: MOREL, PIERRE
Address: PO BOX 480760
City-St-Zip: FT LAUDERDALE, FL 33348

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 for the exemption stated in Section 119.07(3)(i), 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: PIERRE MOREL

PRES

04/15/2005

Electronic Signature of Signing Officer or Director

Date