2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2006
Secretary of State

DOCUMENT# 664839

Entity Name: INTERNATIONAL PROGRAM CONSULTANTS INC.

Current Principal Place of Business:

2000 ISLAND BLVD
#1009
AVENTURA, FL 331604960

New Principal Place of Business:

Current Mailing Address:

52 EAST END AVENUE
NEW YORK, NY 10028

New Mailing Address:

FEI Number: 59-2052083 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KAGAN, MILDRED
2000 ISLAND BLVD
#1009
AVENTURA, FL 33160 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:	PCD	( ) Delete
Name:	KAGAN, RUSSELL J	
Address:	2000 ISLAND BLVD #1009	
City-St-Zip:	AVENTURA, FL 331604960	
Title:	VD	( ) Delete
Name:	KAGAN, MICHAEL	
Address:	52 EAST END AVENUE 23-A	
City-St-Zip:	NEW YORK, NY 10028	
Title:	VTD	( ) Delete
Name:	KAGAN, MILDRED	
Address:	2000 ISLAND AVE	
City-St-Zip:	AVENTURA, FL 331604960	
Title:	D	( ) Delete
Name:	KAGAN, PHILLIP	
Address:	3713 MEDLO DRIVE	
City-St-Zip:	BALTIMORE, MD 21215	
Title:	D	( ) Delete
Name:	TAYLOR, EVAN	
Address:	21300 NE 19TH AVENUE	
City-St-Zip:	MIAMI, FL 33179	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: RUSSELL KAGAN PCD 01/13/2006

Electronic Signature of Signing Officer or Director — Date