

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739541

Entity Name: AYUDA, INC.

FILED
Apr 21, 2006
Secretary of State

Current Principal Place of Business:

7118 BYRON AVENUE
MIAMI BEACH, FL 33141 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 414597
MIAMI BEACH, FL 33141

New Mailing Address:

FEI Number: 59-1761257

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SUSI, DIANA
7118 BYRON AVE
MIAMI BCH, FL 33141 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

OFFICERS AND DIRECTORS:

Title: PDC () Delete
Name: SUSI, DIANA
Address: 7118 BYRON AVENUE
City-St-Zip: MIAMI, FL 33141

Title: DO () Delete
Name: EGOZI, JEANNETTE
Address: 7118 BYRON AVE
City-St-Zip: MIAMI, FL 33141

Title: VPCR () Delete
Name: AVERBACH, SUSAN
Address: 7118 BYRON AVE
City-St-Zip: MIAMI, FL 33141

Title: DT () Delete
Name: SUSI, DORA
Address: 7118 BYRON AVE
City-St-Zip: MIAMI BEACH, FL 33141

Title: CFO () Delete
Name: GAGLIARDI, ILEANA
Address: 7118 BYRON AVE
City-St-Zip: MIAMI, FL 33141

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANA SUSI

PRES

04/21/2006

Electronic Signature of Signing Officer or Director

Date