

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Oct 12, 2009
Secretary of State**

DOCUMENT# 753515

Entity Name: INTERNATIONAL AFFILIATION OF INDEPENDENT ACCOUNTING FIRMS, INC.**Current Principal Place of Business:**9200 S. DADELAND BLVD.
#510
MIAMI, FL 331562703**New Principal Place of Business:****Current Mailing Address:**9200 S. DADELAND BLVD.
#510
MIAMI, FL 331562703**New Mailing Address:**

FEI Number: 59-1819130

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:GABAY, JULIO
9200 SO DADELAND BLVD
STE 510
MIAMI, FL 33156 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: D () Delete
Name: GABAY, JULIO
Address: 9200 S. DADELAND BLVD, SUITE 510
City-St-Zip: MIAMI, FL 33156 USTitle: D (X) Delete
Name: FRAME, DAVID
Address: 1 PARK PLACE, CANARY WHARF
City-St-Zip: LONDON, ENGLAND, UK E14 4HJ UKTitle: D (X) Delete
Name: THOMAS, GOEBEL
Address: CICEROSTRABE 2
City-St-Zip: BERLIN, GERMANY, GE 10709 GETitle: D (X) Delete
Name: HUNG LU, NGAI
Address: 101-A UPPER CROSS ST. # 11-22
City-St-Zip: SINGAPORE, SG 058358 SGTitle: D (X) Delete
Name: MOORE, TIMOTHY
Address: 2603 AUGUSTA DRIVE, SUITE 1100
City-St-Zip: HOUSTON, TX 77057 USTitle: D (X) Delete
Name: ECHEVARRIA, JORGE
Address: CONVENCION 1382 PISO 5
City-St-Zip: MONTEVIDEO, UR 11100 UR**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
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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 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: JULIO GABAY

D

10/12/2009

Electronic Signature of Signing Officer or Director_____
Date