

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006036

Entity Name: IBERCONDOR, S.A.

FILED
Apr 17, 2006
Secretary of State

Current Principal Place of Business:

IBERCONDOR S.A. MIAMI AGENCY
8566 NW 61ST ST
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

IBERCONDOR S.A. MIAMI AGENCY
8566 NW 61ST ST
MIAMI, FL 33166

New Mailing Address:

FEI Number: 98-0179288

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SETCHEN, JASON A ESQ
999 PONCE DE LEON
SUITE 605
CORAL GABLES, FL 33134 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: CV () Delete
Name: EL REZ, WAEL
Address: C/ JOSELITO NO 18
City-St-Zip: MADRID, SPAIN,

Title: VC () Delete
Name: LOPEZ MATRAN, ANTONIO
Address: C/ VALLE DE TENA NO 12 BOADILLA DEL MONTE
City-St-Zip: MADRID, SPAIN,

Title: P () Delete
Name: LOPEZ, ANTONIO
Address: C/ VALLE DE TENA NO 12 BOADILLA DEL MONTE
City-St-Zip: MADRID, SPAIN,

Title: SD (X) Delete
Name: MARQUEZ GOITIA, JUAN FRANCISCO
Address: C/PLAYA DE ASTILLEROS NO 16
City-St-Zip: SPAIN,

Title: T (X) Delete
Name: PEREZ, JAVIER
Address: AVENIDA SAN LUIS 166 3EROC, 28033
City-St-Zip: MADRID, SPAIN,

Title: M (X) Delete
Name: VALDES, MONICA
Address: 15242 S.W. 27 STREET
City-St-Zip: MIAMI, FL 33185

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR. (X) Change () Addition
Name: OVIEDO-ARROYO, FERNANDO
Address: AVDA DE EUROPA #9
City-St-Zip: MADRID, SPAIN, SP 28820

Title: DIR. (X) Change () Addition
Name: MENENDEZ, ANTONIO
Address: AVDA DE EUROPA #9
City-St-Zip: MADRID, SPAIN, SP 28820

Title: MGR. (X) Change () Addition
Name: VALDES, MONICA
Address: 15242 S.W. 27TH STREET
City-St-Zip: MIAMI, FL 33185 US

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: MONICA VALDES

MGR.

04/17/2006

Electronic Signature of Signing Officer or Director

Date