

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000311

FILED  
Jul 04, 2007  
Secretary of State

Entity Name: IFA, INC.

**Current Principal Place of Business:**

7820 NORTH CLARK AVENUE  
TAMPA, FL 33614 US

**New Principal Place of Business:**

**Current Mailing Address:**

7820 NORTH CLARK AVENUE  
TAMPA, FL 33614 US

**New Mailing Address:**

FEI Number: 59-3690687      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

TORRES, ORLANDO  
7820 N. CLARK AVE  
TAMPA, FL 33614 US

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: TORRES, ORLANDO  
Address: 7820 N. CLARK AVE  
City-St-Zip: TAMPA, FL 33614

Title: D ( ) Delete  
Name: REYES, PETER  
Address: 6403 N. CAMERON  
City-St-Zip: TAMPA, FL 33614

Title: D ( ) Delete  
Name: MARTINEZ, MANURL  
Address: 7018 N. THATCHER ST.  
City-St-Zip: TAMPA, FL 33614

**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:

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: ORLANDO TORRES

D

07/04/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date