2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2006
Secretary of State

DOCUMENT# N05000005955

Entity Name: FOUNDATION FOR INTERNATIONAL ASSISTANCE & DEVELOPMENT , IAF,INC.

Current Principal Place of Business:

8770 SUNSET DRIVE
198
MIAMI, FL 33173 US

New Principal Place of Business:

1200 G. STREET, NW
SUITE 800
WASHINGTON DC, DC 20005 US

Current Mailing Address:

1200 G. STREET, NW
SUITE 800
WASHINGTON DC, DC 20005 US

New Mailing Address:

FEI Number: 20-2977411 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BETTER BUSINESS MANAGEMENT, INC.
3815 SW 105 COURT
MIAMI, FL 33165 US

Name and Address of New Registered Agent:

RIVERA, MARIA
8770 SUNSET DRIVE
MIAMI, FL 33173 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: MARIA RIVERA 04/18/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: PINO, ALBERTO R.N.
Address: 1200 G STREET, NW
City-St-Zip: WASHINGTON DC, DC 20005 US

Title: VP ( ) Delete
Name: PINO, ODALYS
Address: 1200 G STREET, NW
City-St-Zip: WASHINGTON DC, DC 20005 US

Title: T ( ) Delete
Name: MERCEDES, JOSE L.E.O
Address: 1200 G STREET, NW
City-St-Zip: WASHINGTON DC, DC 20005 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: RIVERA, MARIA
Address: 1200 G STREET, NW
City-St-Zip: WASHINGTON DC, DC 20005 US

Title: VP (X) Change ( ) Addition
Name: RODRIGUEZ, MANUEL
Address: 1200 G STREET, NW
City-St-Zip: WASHINGTON DC, DC 20005 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S ( ) Change (X) Addition
Name: PINO, ODALYS
Address: 1200 G STREET, NW
City-St-Zip: WASHINGTON DC, DC 20005 US

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: MARIA RIVERA P 04/18/2006
Electronic Signature of Signing Officer or Director Date