2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010001

FILED Feb 16, 2006 Secretary of State

Entity Name: IRANIAN AMERICAN CHAMBER OF COMMERCE, INC.

Current Principal Place of Business: New Principal Place of Business:

1561 DALE AVENUE WINTER PARK, FL 32789

Current Mailing Address: New Mailing Address:

1561 DALE AVENUE P.O. BOX 2467

WINTER PARK, FL 32789 ORLANDO, FL 328022467

FEI Number: 06-1758020 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ZAERI, BEN ESQ KHANLI, HAMID P.O. BOX 940607 1170 WEKIVA SPRINGS ROAD

LONGWOOD, FL 32779 MAITLAND, FL 327940607 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: HAMID KHANLI 02/16/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete ALBEKORD, HOSSEIN SHAHNAVAZ, ALIREZA Name: Name:

1561 DALE AVENUE Address: 2242 WESTMINSTER TERRACE Address:

City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: OVIEDO, FL 32765

Title: Title: (X) Change () Addition () Delete BALOUCHIAN, MOHSEN Name:

Name: SADRI, JOHN Address: 439 BUCKSKIN COURT Address: 306 TINDER PLACE City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: CASSELBERRY, FL 32707

Title: () Delete Title: (X) Change () Addition SHAHNAVAZ, ALI R

Name: KHANLI, HAMID T Name: 2242 WESTMINSTER TERRACE 2117 FALKNER RD. Address: Address: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: MAITLAND, FL 32751

Title: () Delete Title: () Change (X) Addition Name: Name: BALOUCHIAN, MOHSEN 439 BUCKSKIN COURT Address: Address: City-St-Zip: City-St-Zip: WINTER SPRINGS, FL 32708

Title: () Delete Title: () Change (X) Addition

ALBEKORD, HOSSEIN Name: Name: 1561 DALE AVE. Address: Address: City-St-Zip: City-St-Zip: WINTER PARK, FL 32789

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: HAMID KHANLI Т 02/16/2006