## 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N28762  1. Entity Name THE INVESTORS ALLIANCE, INC.							1	10 PM 2			
Principal Place 1388 NW 2N #4-B BOCA RATON	ID AVE. 1, FL 3343: 	2	1388 #4-8 BOC	RATON, FL 3343	32			ARY OF S			
2. Principal Place of Business - No P.O. Box #				ling Address				[84] 78[4] 84]	II BIII EI BIII EI EI BII	IN BIRTH BIRNI	INI NA 10 <b>8</b> 7
Suite, Apt. #, etc.			Su	ite, Apt. #, etc.			09202007 CI	hg-NP	CR2E037 (	12/06)	
City & State			Cit	y & State			4. FEI Number 65-005592	27		1	plied For Applicable
Zip	Country		Zir		Country		5. Certificate of St	tatus Desired		.75 Addi	
6. Name and Address of Current Registered Agent					Name	·	7. Name and Add	Iress of New Re	gistered Age	nt	
LARDINO, FRANK A 1388 NW 2ND AVE. #4-B						Street Address (P.O. Box Number is Not Acceptable)					
BOCA RATON, FL 33432						City FL Zip Code					
8. 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   I am familiar with, and accept the obligations of registered agent.											
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE											
Amended AR is \$61.25  9. Election Campaign 1 Trust Fund Contribu							\$5.00 May Be Added to Fees		ike check pa da Departme	•	
10.	LDD	OFFICERS AND D		11.		ADDITIONS/CHANG					
NAME STREET ADDRESS CITY-ST-ZIP	PD Delete III LARDINO, FRANK A. NA 400 S DIXIE HIGHWAY, BUILDING 2 BOCA RATON, FL 33432 CII					#	.505674 1388 N. BOCA SATO	L. MAYA W. BOU W. FZ	12-0 - 4- L <del>UTE</del> 3-3	] Change NBW 3 43	X Addition (1) Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Delete II HETZEL, DORIS I. 400 S DIXIE HIGHWAY, BUILDING 2 BOCA RATON, FL					L1	NDA E-S	BOCA PA	4570N 1	_	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TITLE PERKINS, PAUL B. 400 S DIXIE HIGHWAY, BUILDING 2 SIR BOCA RATON, FL 33432 CIT						ANK A. LA 88 NW BO CA RATION	ROING- PCA RA	-PD 5 70~ 3343.	(Change BUY Z	- Addition - #43
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delate	TITLE NAME STREET ADDRESS CITY-ST-ZIP	5				 Change	Addition
12. Thereby certify that the information supplied with this tying does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is irrupted and charter and that my 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 amplified to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all of ter like empowered.  SIGNATURE:  SIGNATURE:  SIGNATURE AND TYPEN OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Date											