## 2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N96000004439

FILED May 06, 2005 Secretary of State

Entity Name: IRANIAN PROFESSIONALS ASSOCIATION OF SOUTH FLORIDA, INC.

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

P.O. BOX 52-3313 MIAMI, FL 331523313 US

**Current Mailing Address: New Mailing Address:** 

PO BOX 52-3313 MIAMI, FL 331523313

FEI Number: 65-0806047 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:

MARDPOUR, LADAN 3827 POND ÁPPLE DR. WESTON, FL 33332

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:

City-St-Zip:

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

MIAMI, FL 33152 US

(X) Change ( ) Addition

MIAMI, FL 33152 US

() Delete HAGHAYEGH, FARIBA ZOLFAGHARI, GHASEM Name: Name: 10910 SW 140 AVE Address: 79737 N.E. 2ND AVE. Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33179

Title: VPD Title: (X) Change ( ) Addition ( ) Delete TAVAKOLY, AHMAD Name: DHAHANSHAHI, REZA Name:

Address: 8723 SW 129 ST Address: 155 BENTLEY DR.

City-St-Zip: MIAMI, FL 33176 US City-St-Zip: MIAMI SPRINGS, FL 33166 US

Title: () Delete Title: (X) Change ( ) Addition DEHBOZORGE, REZA DEHBOZORGI, REZA Name: Name: PO BOX 52-3313 Address: Address: PO BOX 52-3313 City-St-Zip:

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

MOGHANI, SEYED Name: DJAHANSHANI, REZA Name: 8770 SUNSET DR. STE. 191 Address: 1207 GENERAL POINTE Address: City-St-Zip: PALM BEACH, FL 33418 US City-St-Zip: MIAMI, FL 33173 US

Title: ( ) Delete Title: (X) Change ( ) Addition MARDPOUR, LADAN NEMATI, AZAM Name: Name:

19321 NW 10 ST 4000 CYPRESS GROVE WAY #406 Address: Address: City-St-Zip: PEMBROKE PINES, FL 33029 US City-St-Zip: POMPANO BEACH, FL 33069 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: REZA DEHBOZORGI TD 05/06/2005