

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004439

FILED  
May 04, 2006  
Secretary of State

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

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 52-3313  
MIAMI, FL 331523313

**New Mailing Address:**

**FEI Number:** 65-0806047      **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:**

MARDPOUR, LADAN  
3827 POND APPLE DR.  
WESTON, FL 33332 US

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

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: PD ( ) Delete  
Name: HAGHAYEGH, FARIBA  
Address: 79737 N.E. 2ND AVE.  
City-St-Zip: MIAMI, FL 33179

Title: VPD ( ) Delete  
Name: DHAHANSHAH, REZA  
Address: 155 BENTLEY DR.  
City-St-Zip: MIAMI SPRINGS, FL 33166 US

Title: TD ( ) Delete  
Name: DEHBOZORGI, REZA  
Address: PO BOX 52-3313  
City-St-Zip: MIAMI, FL 33152 US

Title: VP ( ) Delete  
Name: MOGHANI, SEYED  
Address: 8770 SUNSET DR. STE. 191  
City-St-Zip: MIAMI, FL 33173 US

Title: SCR ( ) Delete  
Name: NEMATI, AZAM  
Address: 4000 CYPRESS GROVE WAY #406  
City-St-Zip: POMPANO BEACH, FL 33069 US

**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:

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 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: DEHBOZORGI, REZA

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05/04/2006

Electronic Signature of Signing Officer or Director

Date