

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004909

FILED
Jan 21, 2009
Secretary of State

Entity Name: INTERNATIONAL ASSOCIATION OF ADAPTIVE SCIENCES, INC.

Current Principal Place of Business:

4573 DOLPHIN DR.
SUITE 69
LAKE WORTH, FL 33463

New Principal Place of Business:

842 MANGO DR
WEST PALM BEACH, FL 33415

Current Mailing Address:

4573 DOLPHIN DR.
SUITE 69
LAKE WORTH, FL 33463

New Mailing Address:

PO BOX 491
BOYNTON BEACH, FL 33425

FEI Number: 06-0898729

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

IMUAS
4573 DOLPHIN DR.
SUITE 69
LAKE WORTH, FL 33463 US

Name and Address of New Registered Agent:

VALEZ, AUGUSTO DIR
842 MANGO DR
WEST PALM BEACH, FL 33415 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: AUGUSTO VALEZ

01/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OAKLEY III, C. E
Address: 4573 DOLPHIN DR. SUITE 69
City-St-Zip: LAKE WORTH, FL 33463

Title: VP () Delete
Name: PANCHULA, LESLIE B DR
Address: 4573 DOLPHIN DR. SUITE 69
City-St-Zip: LAKE WORTH, FL 33463

Title: TD () Delete
Name: OSPINA, MARIA L DR
Address: 4573 DOLPHIN DR. SUITE 69
City-St-Zip: LAKE WORTH, FL 33463

Title: D () Delete
Name: GARCIA, GILBERTO N DR
Address: 4573 DOLPHIN DR. SUITE 69
City-St-Zip: LAKE WORTH, FL 334563

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PANCHULA, LESLIE B
Address: 842 MANGO DR
City-St-Zip: WEST PALM BEACH, FL 33415

Title: VP (X) Change () Addition
Name: POGNON, PIERRE B DR
Address: 424 S B STREET # B4
City-St-Zip: LAKE WORTH, FL 33460

Title: TD (X) Change () Addition
Name: POGNON, PIERRE B
Address: 424 S B STREET #B4
City-St-Zip: LAKE WORTH, FL 33460

Title: D (X) Change () Addition
Name: LEAMAN, KIMBERLY D
Address: 842 MANGO DR
City-St-Zip: WEST PALM BEACH, FL 33415

I hereby certify that the information supplied with this filing does not qualify 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: LESLIE B PANCHULA

P

01/21/2009

Electronic Signature of Signing Officer or Director

Date