API 409	, 4004	o.vv a
Secret	ary o	f State

04-28-2002 90775 022 ****61.25

DO NOT WRITE IN THIS SPACE

DOCUMENT # N9600005473

1. Entity Name

INTERNATIONAL ADVERTISING ASSOCIATION, INC.

800 BRICKELL AVE STE 1115 MIAMI FL 33131

บัร

Principal Place of Business

800 BRICKELL AVE STE 1115 MIAMI FL 33131 US

Mailing Address

2. Principal Place of Business 1200 AN ASTASIA

Suite, Apt. #, etc.

3. Mailing Address

GHBUES,

City & State

Zip

Suite, Apt. #, etc.

Country

4. FEI Number

65-0533645

7. Name and Address of New Registered Agent

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Applied For

Not Applicable

6. Name and Address of Current Registered Agent

OPPENHEIM, STEVEN P 800 BRICKELL AVE STE 1115 **MIAMI FL 33131**

Name

Street Address (P.O. Box Number is Not Acceptable)

Zip Code FL

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.

SIGNATURE _

	Signature, typed or printed name of registered agent and title if appl	icable. (NOTE: R	egistered Agent signa	ture required when reinstating)	DATE			
FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees						
10.	OFFICERS AND DIRECTORS		11.		ES TO OFFICERS AND DIRECTORS IN	10		
TITLE	DS	☐ Delete	TITLE	PE	'Ex Change	☐ Addition		
NAME	CROW, SABRINA		NAME	1, .				
STREET ADDRESS	95 MERRICK WAY		STREET ADDRESS	1200 ANASTASI	A AVE, #240,			
CITY-ST-ZIP	CORAL GABLES FL 33134		CITY-ST-ZIP	CORAL GABU	A AVE, #240 ES, FL 33134	,		
TITLE	DP	☐ Delete	TITLE	D	Change	Addition		
NAME	PALACIOS, GRACE		NAME			_		
STREET ADDRESS	9200 S DADELAND BLVD, SUITE 307		STREET ADDRESS	1200 ANIASTAC	UA AVE, #ZYO	,		
CITY-ST-ZIP	MIAMI FL 33156		CITY-ST-ZIP	CORAL GAR	NA AVE, #240 LES, FL 33134			
TITLE	DT	☐ Delete	TITLE	TOP	Change	Addition		
NAME	THOMAS, DICK		NAME	RODRIGUEZ, R	Co REDIT	% /		
STREET ADDRESS	100 NW 37 AVE.		STREET ADDRESS	1720 ANASTA	VA ALE # 240	•		
CITY-ST-ZIP	MIAMI_FL 33125		CITY-ST-ZIP	CORAL GA	RLEC FI 7717V	\mathcal{L}		
TITLE	D	☐ Delete	TITLE		Change	Addition		
NAME	ANDERSON, MARK		NAME			_		
STREET ADDRESS	1101 BRICKELL AVE STE 401		STREET ADDRESS	LZOU ANASTAS	in Ave. # 240	ĺ		
CITY-ST-ZIP	MIAMI FL 33131		CITY-ST-ZIP	CORAL GABO	ES. H 33134			
TITLE	DV	☐ Delete	TITLE	DV	☐ Change	Addition		
NAME	TAGGART, DAVID		NAME	INEUHAUS, +	HARRY	<i>(*</i> ` \		
STREET ADDRESS	800 DOUGLAS RD, SUITE 460		STREET ADDRESS	1200 ANAST	HSIA AUF # 24	්		
	MIAMI FL 33134		CITY-ST-ZIP	COPHI GASI				
TITLE	D	☐ Delete	TITLE	DS	Change	☐ Addition		
NAME	OPPENHEIM, STEVEN P		NAME	-				
STREET ADDRESS	800 BRICKELL AVE STE 1115		STREET ADDRESS					
OUTS OF THE	MIAMI FL 33131		CITY-ST-ZIP					
12. Thereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all attentions and 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all attentions are 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.

SIGNATURE: