

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005473

FILED
Apr 30, 2009
Secretary of State

Entity Name: INTERNATIONAL ADVERTISING ASSOCIATION, INC.

Current Principal Place of Business:

5736 SW 31 ST.
MIAMI, FL 33255 US

New Principal Place of Business:

3291 MATILDA STREET
MIAMI, FL 33133 US

Current Mailing Address:

P.O.BOX 453638
SUITE 1107
MIAMI, FL 33145 US

New Mailing Address:

3291 MATILDA STREET
MIAMI, FL 33133 US

FEI Number: 65-0533645

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OPPENHEIM, STEVEN P
800 BRICKELL AVE
STE 1107
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

OPPENHEIM, STEVEN P
1250 EAST HALLANDALE BEACH BLV.
STE 1007
HALLANDALE BEACH,, FL 33009 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:

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: OLIVA, ROBERT
Address: 5736 SW 31 ST.
City-St-Zip: MIAMI, FL 33155 US

Title: DP (X) Delete
Name: CAMPBELL, ALAN
Address: 5736 SW 31 ST.
City-St-Zip: MIAMI, FL 33155 US

Title: S () Delete
Name: OPPENHEIM, STEVEN P
Address: 800 BRICKELL AVENUE, STE 1107
City-St-Zip: MIAMI, FL 33131 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CAMPBELL, ALAN
Address: 3291 MATILDA STREET
City-St-Zip: MIAMI, FL 33133 US

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 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: ALAN CAMPBELL

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date