2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004117

FILED Mar 25, 2005 Secretary of State

Entity Name: MANDANA INTERNATIONAL YOUTH FOUNDATION, INC.

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

401 E. LAS OLAS BLVD. 401 E. LAS OLAS BLVD. SUITE 1470A, 14TH FLOOR SUITE 1470A, 14TH FLOOR FT. LAUDERDALE, FL 33301 FT. LAUDERDALE, FL 33301 US

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

401 E. LAS OLAS BLVD 401 E. LAS OLAS BLVD SUITE 1470A, 14TH FLOOR SUITE 1470A, 14TH FLOOR FT. LAUDERDALE, FL 33301 FT. LAUDERDALE, FL 33301 US

FEI Number: 52-2120233 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

SHARIFI, MANDANA SHARIFI, MANDANA D 905 S.E. 2ND COURT APT#RW 16 NE 11TH AVE

FT. LAUDERDALE, FL 33301 FT. LAUDERDALE, FL 33301 US 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: MANDANA SHARIFI 03/25/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

42 CASHEW CITY ROAD

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

SHARIFI, MANDANA SHARIFI, MANDANA Name: Name: 905 SE 2ND COURT, APT#RW Address: 16 NE 11TH AVE Address:

City-St-Zip: FT. LAUDERDALE, FL 33301 City-St-Zip: FT. LAUDERDALE, FL 33301 US

Title: D () Delete Title: D (X) Change () Addition FIZER, ED Name: FIZER, ED Name:

Address: ROUTE 1 BOX 254 Address: ROUTE 1 BOX 254 City-St-Zip: PARK FOREST, IL 60466 City-St-Zip: PARK FOREST, IL 60466 US

Title: () Delete Title: (X) Change () Addition PERINCHIEF, PHIL PERINCHIEF, PHIL Name: Name:

42 CASHEW CITY ROAD Address: City-St-Zip: DDOZ BERMUDA. OC City-St-Zip: ST. DAVIDS, BERMUDA, BD. BERMUDA OC

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

Name: WORRELL, LUCINDA Name: WORRELL, LUCINDA Address: 237 NORTH SHORE Address: 237 NORTH SHORE

City-St-Zip: BAILEY BAY, BERMUDA CR04, City-St-Zip: BAILEY BAY, BERMUDA CR04, BD BERMUDA OC

Address:

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: MANDANA SHARIFI D 03/25/2005