2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED Apr 24, 2006 08:00 AN Secretary of State **DOCUMENT # P00000027902** 1. Entity Name INTERDATA ACCOUNTING SYSTEMS CORP. Mailing Address Principal Place of Business 1005 S.W. 87TH AVENUE 1005 S.W. 87TH AVENUE MIAMI FL 33174-3208 MIAMI FL 33174-3208 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) Applied For 4. FEI Number City & State City & State 59-2029358 Not Applicat Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PEREIRA, JORGE L Street Address (P.O. Box Number is Not Acceptable) 1005 S.W. 87TH AVENUE MIAMI FL 33174-3208 City Zip Code 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. I am familiar with, and access the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title it applicable (NOTE Registered Agent signative required when reinstalling) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May D After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10, 11. ☐ Change ☐ A: :** TITLE ☐ Delete TITLE NAME U00000529074 NAME PERREIRA, JORGE L STREET ADDRESS 1005 S.W. 87TH AVENUE STREET ADDRESS 05/05/06-80063-005 150.00 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33174-3208 Change ☐ Delete □ A., TITLE TITM MANAE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TY-ST-ZIP □ Change ☐ Add., Detete THE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP Change □ A.I. ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP Change ☐ Art. ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete THILE Change Adic BBF NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the informatic 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 direction of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 1

JORGE L. PEREIRA-PRESIDENT

4/17/06

305-266-0575

Daytimo Phone #