2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006
Secretary of State

DOCUMENT# P01000069476

Entity Name: INTERNATIONAL ASSOCIATION OF COURIERS INC.

Current Principal Place of Business:

12601 SE 53RD TERRACE ROAD
BELLEVIEW, FL 34420

New Principal Place of Business:

Current Mailing Address:

12601 SE 53RD TERRACE ROAD
BELLEVIEW, FL 34420

New Mailing Address:

FEI Number: 65-1122585 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NEUHARTH, DAVID J SEC
12601 SE 53RD TERRACE RD.
BELLEVIEW, FL 34420 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CRAIG, KATHY
Address: 2960 MONUMENT SHADOWS
City-St-Zip: GERING, NE 69341

Title: VP ( ) Delete
Name: CRAIG, JOSEPH
Address: 2960 MONUMEN SHADOWS
City-St-Zip: GERING, NE 693411568

Title: S ( ) Delete
Name: NEUHARTH, DAVID
Address: 12601 SE 53RD TERRACE ROAD
City-St-Zip: BELLEVIEW, FL 34420

Title: P ( ) Delete
Name: CRAIG, KATHY
Address: 2960 MONUMENT SHADOWS
City-St-Zip: GERING, NE 693411568

Title: T ( ) Delete
Name: NEUHARTH, ELIZABETH
Address: 120601 SE 53RD TERR RD.
City-St-Zip: BELLEVIEW, FL 34420

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CRAIG, KATHY
Address: 3108 SYCAMORE RD
City-St-Zip: AMES, IA 50014

Title: VP (X) Change ( ) Addition
Name: CRAIG, JOSEPH
Address: 3108 SYCAMORE RD
City-St-Zip: AMES, IA 50014

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change ( ) Addition
Name: CRAIG, KATHY
Address: 3108 SYCAMORE RD
City-St-Zip: AMES, IA 50014

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHY CRAIG PRES 04/24/2006

Electronic Signature of Signing Officer or Director — Date