

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000020871

Entity Name: IROA CASCADE INC

FILED
Apr 30, 2006
Secretary of State

Current Principal Place of Business:

1265 NW 140 TERR.
PEMBROKE PINES, FL 33028

New Principal Place of Business:

1265 NW 140TH TERR.
PEMBROKE PINES, FL 33028

Current Mailing Address:

CCS 15286 4440 NW 73RD. AV.
MIAMI, FL 33166

New Mailing Address:

1265 NW 140TH TERRACE
PEMBROKE PINES, FL 33028

FEI Number: 56-2465468

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARTILES, OSWALDO
1265 NW 140 TERR.
PEMBROKE PINES, FL 33028 US

Name and Address of New Registered Agent:

ARTILES, OSWALDO
1265 NW 140TH TERRACE
PEMBROKE PINES, FL 33028 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: _____

Electronic Signature of Registered Agent

04/30/2006

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ARTILES, OSWALDO
Address: 1265 NW 140 TERR.
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VP () Delete
Name: LAYDERA, IVIA
Address: 1265 NW 140 TERR.
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ARTILES, OSWALDO
Address: 1265 NW 140TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VP (X) Change () Addition
Name: LAYDERA, IVIA
Address: 1265 NW 140TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33028

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: OSWALDO ARTILES

P

04/30/2006

Electronic Signature of Signing Officer or Director

Date