2006 FOR PROFIT CORPORATION ANNUAL REPORT

Aug 18, 2006 8:00 am Secretary of State **DOCUMENT # P04000082179** 08-18-2006 90077 042 ***158.75 1. Entity Name I.H.D.A. INC. Principal Place of Business Mailing Address 50025505 5552-1 WOOD-ROSE CT. 5552-1 WOOD-ROSE CT. FT. MYERS, FL 33907 FT. MYERS, FL 33907 CR2E034 (11/05) 08022006 No Cha-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 51-0512501 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required ____ _6. Name and Address of Current Registered Agent. INIJE, CHARLES DO NOT WRITE 16499 NE 19TH AVE., #213A FT. MYERS, FL 33916 IN THIS SPACE 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 accept the obligations of registered agents SIGNATURE FILE NOW!!! FEE IS \$150.00 9.-Election Campaign Financing \$5.00-May-Be In accordance with s. 607_193(2)(b), F_S; the Trüst Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 6, 2006 10. OFFICERS AND DIRECTORS TITLE NAME SHAH, IMRAN 3407 WINKLER AVE .. EXT. 321 5552 WOOD ROSE OT STREET ADDRESS ET. MYERS, FL 33916 FT MYERS, FL 33907 CITY-ST-ZIP TITLE NAME YGBERG, LUDMILLA 3467 WINKLER AVE., EXT. 821 5552 WOODIQUSE CT STREET ADDRESS CITY-ST-ZIP... ET: MYERS, FL 33916 FT MYERS, FL 33907 NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP. NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

LMRAN. M.

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

SIGNATURE AND TYPED

FILED