

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000011810

Entity Name: ILDAN, INC.

FILED
Mar 06, 2006
Secretary of State

Current Principal Place of Business:

11208 HUTCHINSON BLVD., APT. 128
PANAMA CITY BEACH, FL 32407

New Principal Place of Business:

Current Mailing Address:

11208 HUTCHINSON BLVD., APT. 128
PANAMA CITY BEACH, FL 32407

New Mailing Address:

FEI Number: 20-2164548

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAZO, ANDREY
11208 HUTCHINSON BLVD. APT. 128
PANAMA CITY BEACH, FL 32407 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: MAZO, ANDREY
Address: 11208 HUTCHINSON BLVD., APT. 128
City-St-Zip: PANAMA CITY BEACH, FL 32407

Title: S () Delete
Name: ROZMAN, MARK
Address: 5 EATON PINES LANE
City-St-Zip: FRAMINGHAM, MA 01701

Title: T () Delete
Name: GOLDFARB, MAX
Address: 787 BAY ROAD
City-St-Zip: SHARON, MA 02067

Title: D () Delete
Name: SHUR, MICHAEL
Address: 4660 BEDFORD AVE. SPT. 3A
City-St-Zip: BROOKLYN, NY 11235

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: ANDREY MAZO

P

03/06/2006

Electronic Signature of Signing Officer or Director

Date