2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000034366

Entity Name: IKALON, INC.

FILED Apr 27, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

218 SE 14TH ST. #2002 1900 N. BAYSHORE DRIVE # 4506

MIAMI, FL 33131 MIAMI, FL 33132

Current Mailing Address: New Mailing Address:

218 SE 14TH ST. #2002 1900 N. BAYSHORE DRIVE # 4506

MIAMI, FL 33131 MIAMI, FL 33132

FEI Number: 20-2454933 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

ARDILA, ANA I ARDILA, ANA I

1200 BRICKELL BAY DRIVE 1900 N. BAYSHORE DRIVE # 4506

SUITE 3007 MIAMI, FL 33132 US MIAMI, FL 33131 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: 04/27/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete Title: (X) Change () Addition

ARDILA, ANA I Name: Name: ARDILA, ANA I

218 SE 14TH ST #2002 1900 N. BAYSHORE DRIVE # 4506 Address: Address: MIAMI, FL 33132

City-St-Zip: MIAMI, FL 33131 City-St-Zip:

PD Title: PD Title: () Delete (X) Change () Addition Name: ARDILA, CARLOS H

Name: ARDILA, CARLOS H 218 SE 14TH STREET #2002 1900 N. BAYSHORE DRIVE # 4506 Address: Address:

MIAMI, FL 33131 MIAMI, FL 33132 City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition SD SD ARDILA, MARTITZA P ARDILA, MARTITZA P Name: Name:

218 SE 14TH ST #2002 1900 N. BAYSHORE DRIVE # 4506 Address: Address:

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33132

Title: TD () Delete Title: (X) Change () Addition

ARDILA, CARLOS A ARDILA, CARLOS A Name: Name:

Address: 218 SE 14TH ST #2002 Address: 1900 N. BAYSHORE DRIVE # 4506 City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33132

I hereby certify that the information supplied with this filing does not qualify 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: CARLOS H ARDILA PD 04/27/2008