2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000034366

Entity Name: IKALON, INC.

FILED Jan 20, 2009 Secretary of State

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

1900 N. BAYSHORE DRIVE # 4506 1900 N. BAYSHORE DRIVE MIAMI, FL 33132

4506

MIAMI, FL 33132

Current Mailing Address: New Mailing Address:

1900 N. BAYSHORE DRIVE # 4506 1900 N. BAYSHORE DRIVE

MIAMI, FL 33132 4506

MIAMI, FL 33132

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

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

ARDILA, CARLOS H MR ARDILA, ANA I 1900 N. BAYSHORE DRIVE # 4506 1900 N. BAYSHORE DRIVE 4506

MIAMI, FL 33132 US MIAMI, FL 33132 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: CARLOS ARDILA 01/20/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

() Delete

Name: ARDILA, ANA I

Title:

1900 N. BAYSHORE DRIVE # 4506 Address:

City-St-Zip: MIAMI, FL 33132

Title: () Delete ARDILA, CARLOS H Name:

1900 N. BAYSHORE DRIVE # 4506 Address:

MIAMI, FL 33132 City-St-Zip:

Title: SD () Delete ARDILA, MARTITZA P Name:

1900 N. BAYSHORE DRIVE # 4506 Address:

City-St-Zip: MIAMI, FL 33132

() Delete Title: TD ARDILA, CARLOS A Name:

Address: 1900 N. BAYSHORE DRIVE # 4506

City-St-Zip: MIAMI, FL 33132

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition Title:

Name: ARDILA, CARLOS H

1900 N. BAYSHORE DRIVE # 4506 Address:

City-St-Zip: MIAMI, FL 33132

Title: PD (X) Change () Addition

ARDILA, ANA I Name:

1900 N. BAYSHORE DRIVE # 4506 Address:

MIAMI, FL 33132 City-St-Zip:

Title: (X) Change () Addition MRS

ARDILA, MARITZA Name:

1900 N. BAYSHORE DRIVE # 4506 Address:

City-St-Zip: MIAMI, FL 33132

Title: (X) Change () Addition

ARDILA, CARLOS A Name:

Address: 1900 N. BAYSHORE DRIVE # 4506

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 ARDILA MR 01/20/2009