

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000062166

FILED
Aug 21, 2009
Secretary of State**Entity Name:** I. G. Z. , CORP.**Current Principal Place of Business:**3230 48 AVENUE NE
NAPLES, FL 34120 US**New Principal Place of Business:**9801 NW 117 WAY
MEDLEY, FL 33178 US**Current Mailing Address:**3230 48 AVENUE NE
NAPLES, FL 34120 US**New Mailing Address:**3230 48 AVE NE
NAPLES, FL 34120**FEI Number:** 26-0237899**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MENA, GUSTAVO
3230 48 AVENUE NE
NAPLES, FL 34120 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**OFFICERS AND DIRECTORS:****Title:** P () Delete
Name: MENA, GUSTAVO
Address: 3230 48 AVENUE NE
City-St-Zip: NAPLES, FL 34120 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: P

GM

08/21/2009

Electronic Signature of Signing Officer or Director_____
Date