

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000089701

Entity Name: IAA GROUP, INC.

FILED
Jan 11, 2009
Secretary of State

Current Principal Place of Business:

1809 SW 49TH LANE
CAPE CORAL, FL 33914 US

New Principal Place of Business:

Current Mailing Address:

1221 SW 10TH TER
CAPE CORAL, FL 33991 US

New Mailing Address:

FEI Number: 26-3471971

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANAGEMENT TAX CONSULTING, INC.
1221 SW 10TH TER
CAPE CORAL, FL 33991 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: ARRAS, PETER
Address: REIHERWEG 1 B
City-St-Zip: COLOGNE - GERMANY, XX 50829 DE

Title: P () Delete
Name: ARRAS, SABINE
Address: REIHERWEG 1 B
City-St-Zip: COLOGNE - GERMANY, XX 50829 DE

Title: P () Delete
Name: ABELS, JENS
Address: STARENWEG 10
City-St-Zip: COLOGNE - GERMANY, XX 50829 DE

Title: P () Delete
Name: ARRAS-ABELS, CARMEN
Address: STARENWEG 10
City-St-Zip: COLOGNE - GERMANY, XX 50829 DE

Title: S () Delete
Name: HUTTNER, OLIVER
Address: 1221 SW 10TH TER
City-St-Zip: CAPE CORAL, FL 33991 US

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:

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: PETER ARRAS

CEO

01/11/2009

Electronic Signature of Signing Officer or Director

_____ Date