2006 FOR PROFIT CORPORATION ANNUAL REPORT

Electronic Signature of Registered Agent

DOCUMENT# P95000084193

Entity Name: AILANA OF NORTH AMERICA, INC.

FILED Mar 15, 2006 Secretary of State

Current Principal Place	e of Business:	New Principal Place of Business:		
% THOMAS BAUR 21ST FLOOR,100 N. BIS MIAMI, FL 33132	SCAYNE BLVD.			
Current Mailing Addres	ss:	New Mailing Address:		
% THOMAS BAUR 21ST FLOOR,100 N. BISCAYNE BLVD. MIAMI, FL 33132		C/O THOMAS BAUR, ESQ. 100 N. BISCAYNE BLVD., SUITE 2100 MIAMI, FL 33132		
FEI Number: 65-0641405	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
THOMAS BAUR, ESQ 100 N. BISCAYNE BLVD 21ST FLOOR NEW WO MIAMI, FL 33132 US				
The above named entity in the State of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	

MIAMI, FL 33132

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

SIGNATURE:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

() Delete (X) Change () Addition Title: Title: AIGNER, SUSANNE AIGNER, SUSANNE Name: Name: 100 N. BIXCAYNE BLVD Address: 100 N. BISCAYNE BLVD, SUITE 2100 Address: City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL 33132 Title: () Delete Title: (X) Change () Addition AHRABIAN, DARIUS Name: Name: AHRABIAN, DARIUS Address: Address: 21ST FLOOR, 100 N. BISCAYNE BLVD. 100 N. BISCAYNE BLVD., SUITE 2100 MIAMI, FL 33121 MIAMI, FL 33121 City-St-Zip: City-St-Zip: Title: Title: () Delete AS () Change () Addition Name: BAUR, THOMAS Name: 100 N. BISCAYNE BLVD., 21ST FLOOR Address: Address:

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.

City-St-Zip:

SIGNATURE:	DARIUS AHRABIAN	D 03/15/2	2006
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