

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000058848

Entity Name: UNDER IAM, INC.

FILED
Apr 13, 2006
Secretary of State

Current Principal Place of Business:

1858 NW 22 COURT
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

1858 NW 22 COURT
POMPANO BEACH, FL 33069 US

New Mailing Address:

FEI Number: 65-0713238

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STILES, RICHARD E
1888 NW 22ND COUR
POMPANO BEACH, FL 33069 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: PD () Delete
Name: STILES, DAVID K
Address: 11230 NW 2 MANOR
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VD () Delete
Name: STILES, RICHARD E
Address: 1379 NW 100 AVE
City-St-Zip: CORALSPRINGS, FL 33071

Title: TD () Delete
Name: STILES, PHYLLIS M
Address: 430 NW 112TH AVE
City-St-Zip: CORALSPRINGS, FL 33071

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:

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.

SIGNATURE: DAVID K. STILES

PD

04/13/2006

Electronic Signature of Signing Officer or Director

Date