

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000106152

FILED
Aug 05, 2007
Secretary of State

Entity Name: INTERNATIONAL ACCOUNTING CONSULTANTS INC.

Current Principal Place of Business:

10511 SW 88 STREET
C 103
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

10511 SW 88 STREET
C 103
MIAMI, FL 33176

New Mailing Address:

FEI Number: 65-0800109 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORO, RICHARD
6485 SW 128 CT
MIAMI, FL 33183 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TORO, RICHARD
Address: 6485 SW 128 CT
City-St-Zip: MIAMI, FL 33183

Title: VP () Delete
Name: TORO, RAFAEL J
Address: 10511 SW 88 STREET, SUITE C-103
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: RICHARD TORO

P

08/05/2007

Electronic Signature of Signing Officer or Director

_____ Date