2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 28, 2006 08:00 AM Secretary of State

DOCUMENT # P98000016432 1. Entity Name INTERNATIONAL-REPUBLIC ASSOCIATES, INC.							
Principal Plac 5728 MAUOR SUITE 601 ORLANDO, FI	BLVD .	Mairing Address 5728 MAIOR BLVD SUTE 601 ORLANDO, FL 32819		1 2881 2883 (1)			
DO NOT WRITE IN THIS SPA			CE	02242006 4. FEI Numbe 59-349	No Chg-P	CR2E034 (1	-
6. Name and Address of Current Registered Agent KHATIB, RASHID A 5728 MAJOR BLVD SUITE 601 ORLANDO, FL 32819				IN 7	NOT W	ACE	
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstaling) OATE OATE							
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution.			noing \$5.00 May Be Added to Fees				
10. ITHE MANG STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP HITLE NAME	OFFICERS AND DIR PSTD KHATIB, RASHID A 5728 MAJOR BLVD STE.,#601 ORLANDO, FL 32819 VP HODGE, RANDALL 5728 MAJOR BLVD STE.,#601 ORLANDO, FL 32819	ECTORS			900000 95/19/06-	542622 80110-016	; 150.00
STREET ADDRESS CITY-ST-ZIP INLE NAME STREET ADDRESS CITY-ST-ZIP				_ -	NOT W THIS SP		

12. Thereby certify that the information supplied with this filling does not qualify for the examptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MAME STREET ADDRESS CATY-ST-ZP TIFLE NAME STREET ADDRESS CITY-ST-ZP

na

Rashidkhatik

4-27-06

407-354-2200

Dayfima Phone #