2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 11, 2006
Secretary of State

DOCUMENT# V28049

Entity Name: IBC OF ARIZONA, INC.

Current Principal Place of Business:

730 W. MCNAB ROAD
FT. LAUDERDALE, FL 33309 US

New Principal Place of Business:

Current Mailing Address:

730 W. MCNAB ROAD
FT. LAUDERDALE, FL 33309 US

New Mailing Address:

225 NE MIZNER BOULEVARD
7TH FLOOR
BOCA RATON, FL 33432 US

FEI Number: 65-0327026 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SIROP, KEVIN
730 W. MCNAB ROAD
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

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: LAURA R. DUNLAP 04/11/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CEOD ( ) Delete
Name: ELLMAN, JACOB L
Address: 730 W. MCNAB ROAD
City-St-Zip: FT. LAUDERDALE, FL 33309 US

Title: PD ( ) Delete
Name: ELLMAN, NEIL
Address: 730 W. MCNAB ROAD
City-St-Zip: FT. LAUDERDALE, FL 33309 US

Title: VD ( ) Delete
Name: ELLMAN, LANCE
Address: 730 W. MCNAB ROAD
City-St-Zip: FT. LAUDERDALE, FL 33309 US

Title: VT ( ) Delete
Name: SIROP, KEVIN
Address: 730 W. MCNAB ROAD
City-St-Zip: FT. LAUDERDALE, FL 33309 US

Title: SD ( ) Delete
Name: KLEIN, PETER W
Address: 225 NE MIZNER BOULEVARD, 7TH FLOOR
City-St-Zip: BOCA RATON, FL 33432 US

Title: D ( ) Delete
Name: BROCKWAY, PETER C
Address: 225 NE MIZNER BOULEVARD, 7TH FLOOR
City-St-Zip: BOCA RATON, FL 33432 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:

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: PETER W. KLEIN SD 04/11/2006
Electronic Signature of Signing Officer or Director Date