2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# V63625

Entity Name: INTERNATIONAL GENERAL DEVELOPMENT, INC.

Current Principal Place of Business:

9857 ST AUGUSTINE RD
SUITE 5
JACKSONVILLE, FL 32257 US

New Principal Place of Business:

Current Mailing Address:

9857 ST AUGUSTINE RD
SUITE 5
JACKSONVILLE, FL 32257 US

New Mailing Address:

FEI Number: 59-3148815 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HASSAN, MAJED
9857 ST AUGUSTINE RD
STE 5
JACKSONVILLE, FL 32257 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: HASSAN, MAJED B.
Address: 9857 ST AUGUSTINE RD
City-St-Zip: JACKSONVILLE, FL

Title: V ( ) Delete
Name: HASSAN, ALICE M
Address: 2727 SCOTT MILL TERR
City-St-Zip: JACKSONVILLE, FL

Title: T ( ) Delete
Name: HASSAN, MUNIR B
Address: 2719 SCOTT MILL LN
City-St-Zip: JACKSONVILLE, FL 32223

Title: V ( ) Delete
Name: EL HASSAN, MARC M
Address: 9603 WEXFORD RD.
City-St-Zip: JACKSONVILLE, FL 32257

Title: V ( ) Delete
Name: HASSAN, ANDREW M
Address: 2908 INDIAN HILL DRIVE
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: HASSAN, MAJED B.
Address: 9857 ST AUGUSTINE RD
City-St-Zip: JACKSONVILLE, FL

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: MAJED B HASSAN P 04/28/2006

Electronic Signature of Signing Officer or Director Date