

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H10199

Entity Name: I.A.R. CORPORATION

FILED
Mar 06, 2011
Secretary of State

Current Principal Place of Business:

4613 S. TAMIAMI TRAIL
SARASOTA, FL 34231 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 20589
SARASOTA, FL 34276 US

New Mailing Address:

POST OFFICE BOX 17283
SARASOTA, FL 34276 US

FEI Number: 65-0579796

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASSIDY, COLLEEN PRES
4613 S. TAMIAMI TRAIL
SARASOTA, FL 34231 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

OFFICERS AND DIRECTORS:

Title: PRES
Name: CASSIDY, COLLEEN
Address: P.O. BOX 17283
City-St-Zip: SARASOTA, FL 34276

Title: VP
Name: CASSIDY, COLLEEN
Address: P. O. BOX 17283
City-St-Zip: SARASOTA, FL 34276

Title: TR
Name: CASSIDY, COLLEEN
Address: P.O. BOX 17283
City-St-Zip: SARASOTA, FL 34276

Title: SEC
Name: CASSIDY, COLLEEN
Address: P.O. BOX 17283
City-St-Zip: SARASOTA, FL 34276

I hereby 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 all other like empowered.

SIGNATURE: /S/ COLLEEN CASSIDY

PRES

03/06/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date