

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000011081

FILED
Apr 03, 2006
Secretary of State

Entity Name: INTERNATIONAL DEVELOPMENT & FINANCIAL, LLC

Current Principal Place of Business:

14545 J MILITARY TRAIL, #167
DELRAY BEACH, FL 33484

New Principal Place of Business:

Current Mailing Address:

14545 J MILITARY TRAIL, #167
DELRAY BEACH, FL 33484

New Mailing Address:

FEI Number: 04-3632332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAPADOYIANIS, ERNEST
2234 N. FEDERAL HIGHWAY, SUITE 372
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

PAPADOYIANIS, ERNEST
212 ST ANDREWS BLVD # 645
BOCA RATON, FL 33434 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:

04/03/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CHERCH, XAVIER T
Address: 14545 J MILITARY TRAIL, #167
City-St-Zip: DELRAY BEACH, FL 33484

Title: MGR () Delete
Name: PAPADOYIANIS, ERNEST
Address: 2234 N FEDERAL HWY #372
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: PAPADOYIANIS, ERNEST
Address: 21218 ST. ANDREWS BLVD # 645
City-St-Zip: BOCA RATON, FL 33434

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: XAVIER T. CHERCH

MGR

04/03/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date