2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000007178

Entity Name: ALLIED INTERNATIONAL DEVELOPERS LLC

FILED May 08, 2005 Secretary of State

10416 HALLMARK BLVD 6808 MONARCH PARK DR. RIVERVIEW, FL 33569 APOLLO BEACH, FL 33572

Current Mailing Address: New Mailing Address:

P.O. BOX 2635 P.O. BOX 3336

RIVERVIEW, FL 335682635 APOLLO BEACH, FL 33572

FEI Number: 01-0743390 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MORELL, E. MORELL, E

10416 HÁLLMARK BLVD.

RIVERVIEW, FL 33569 US

6808 MONARCH PARK DR.
APOLLO BEACH, FL 33572 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: 05/08/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: MORELL, ELIEL Name: MORELL, ELIEL Address: 10416 HALLMARK BLVD Address: 6808 MONARCH PARK DR.

City-St-Zip: RIVERVIEW, FL 33569 Address: 6808 MONARCH PARK DR.

City-St-Zip: APOLLO BEACH, FL 33572 US

Title: MGRM Title: MGRM (X) Change () Addition () Delete Name: BEAS-MORELL, MARIA G Name: BEAS-MORELL, MARIA G Address: 10416 HALLMARK BLVD Address: 6808 MONARCH PARK DR City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: APOLLO BEACH, FL 33572 US

Title: () Delete Title: MGRM () Change (X) Addition

Name: Name: ANDREW, CALUORI
Address: Address: 2360 FOREST DR.

City-St-Zip: City-St-Zip: CLEARWATER, FL 33763 US

Title: () Delete Title: MGRM () Change (X) Addition
Name: Name: KATHERTINE, BARDO-CALUORI
Address: 2360 FOREST DR.

City-St-Zip: CLEARWATER, FL 33763 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ELIEL MORELL MGRM 05/08/2005