

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000007178

FILED  
Jul 29, 2006  
Secretary of State

**Entity Name:** ALLIED INTERNATIONAL DEVELOPERS LLC

**Current Principal Place of Business:**

6808 MONARCH PARK DR.  
APOLLO BEACH, FL 33572

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3336  
APOLLO BEACH, FL 33572

**New Mailing Address:**

6808 MONARCH PARK DR.  
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:**

MORELL, E.  
6808 MONARCH PARK DR.  
APOLLO BEACH, FL 33572      US

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

MORELL, ELIEL  
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: E. MORELL

07/29/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MORELL, ELIEL  
Address: 6808 MONARCH PARK DR.  
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: MGRM ( ) Delete  
Name: BEAS-MORELL, MARIA G  
Address: 6808 MONARCH PARK DR.  
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: MGRM (X) Delete  
Name: ANDREW, CALUORI  
Address: 2360 FOREST DR.  
City-St-Zip: CLEARWATER, FL 33763 US

Title: MGRM (X) Delete  
Name: KATHERINE, BARDO-CALUORI  
Address: 2360 FOREST DR.  
City-St-Zip: CLEARWATER, FL 33763 US

**ADDITIONS/CHANGES:**

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 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: E. MORELL

MGRM

07/29/2006

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