

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000019763

Entity Name: I.D.T. LLC

FILED
Mar 04, 2004
Secretary of State

Current Principal Place of Business:

7128 NW 50TH STREET UNIT B-5
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

7128 NW 50TH STREET UNIT B-5
MIAMI, FL 33166

New Mailing Address:

FEI Number: 65-1152636

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTUFAR, FABIANA
7128 NW 50TH STREET UNIT B-5
MIAMI, FL 33166

Name and Address of New Registered Agent:

DUQUE, ASTRID N
7128 NW 50TH STREET UNIT B-5
MIAMI, FL 33166

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: ASTRID NATALIA DUQUE

03/04/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: MONTUFAR TRADE, INC.,
Address: 7128 NW 50TH STREET UNIT B-5
City-St-Zip: MIAMI, FL 33166

Title: MGRM () Delete
Name: DUQUE, NICOLAS
Address: 7128 NW 50TH STREET UNIT B-5
City-St-Zip: MIAMI, FL 33166

Title: MGRM () Delete
Name: RUIZ, CARLOS
Address: 7128 NW 50TH STREET UNIT B-5
City-St-Zip: MIAMI, FL 33166

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:

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: NICOLAS DUQUE

MGRM

03/04/2004

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