2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 17, 2007 08:00 AM Secretary of State

DOCUMENT	Γ#Ι	0200	າດດດ	12221
DOCUMENT		-020	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

1. Entity Name

INTERNATIONAL BUILDING SYSTEMS, LLC



Principal Place of Business

1182 E. NEWPORT CENTER DR. DEERFIELD BEACH, FL 33442

353 INDUSTRIAL PARK DRIVE **BOONE, NC 28607**



01052007 No Chg-LLC DO NOT WRITE IN THIS SPACE

CR2E083 (11/05)

4. FEI Number 02-0555644 Applied For Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

RACK, GARY. 1182 E. NEWPORT CENTER DRIVE DEERFIELD BEACH, FL 33442

DO NOT WRITE IN THIS SPACE

The above named entity submits this statement for the purpose of chan the obligations of registered agent.	ging its registered office or registered agent, or both, in the	State of Florida. I am familiar with, and accept
Signature: typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2007		

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SM MARKETING OF NORTH CAROLINA, INC. 1182 E. NEWPORT CENTER DR. DEERFIELD BEACH, FL 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	
TITLE NAME STREET ADDRESS	

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #