


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000022193
 1. Entity Name
 INTEC INTERACTIVE II, LLC



Principal Place of Business Mailing Address
 5255 NW 159 STREET 5255 NW 159 STREET
 MIAMI, FL 33014 US MIAMI, FL 33014 US

DO NOT WRITE IN THIS SPACE



04152005No Chg-LLC CR2E083 (10/03)

4. FEI Number 01-0793028	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 KRUSZEWSKI, TOM
 5255 NW 159 STREET
 MIAMI, FL 33014

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
 Due by May 1, 2005**

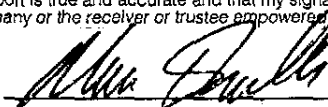
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM EMEA VIDEO GAMES ACCESSORIES, LLC 5255 NW 159 STREET MIAMI, FL 33014
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 04/30/05-80122-001 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  **MARC IACOVELLI** 4/22/05 (305) 628-2886

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #