

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000028565

**FILED**  
**Apr 29, 2005**  
**Secretary of State**

**Entity Name:** OXO ACCESSORIES INTERNATIONAL, LLC

**Current Principal Place of Business:**

440 HARBOUR LIGHTS CT.  
ORLANDO, FL 32817

**New Principal Place of Business:**

3318 DORMER CT.  
WINTER PARK, FL 32792

**Current Mailing Address:**

5830 BALAO WAY S.  
ST PETE BEACH, FL 33706

**New Mailing Address:**

**FEI Number:** 20-0940911

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

IRWIN, TED  
5830 BALAO WAY S  
ST PETE BEACH, FL 33706 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MEMBERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: PRES ( ) Change (X) Addition  
Name: IRWIN, TED  
Address: 3318 DORMER CT.  
City-St-Zip: WINTER PARK, FL 32792

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: TED IRWIN

PRES

04/29/2005

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