

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000042549

FILED
Apr 30, 2005
Secretary of State

Entity Name: IDEAL HOME FURNISHINGS INTERNATIONAL ENTERPRISES, L.L.C.

Current Principal Place of Business:

2629 WAVERLY BARN ROAD, SUITE 123
DAVENPORT, FL 33897

New Principal Place of Business:

2629 WAVERLY BARN ROAD,
123
DAVENPORT, FL 33897

Current Mailing Address:

2629 WAVERLY BARN ROAD, SUITE 123
DAVENPORT, FL 33897

New Mailing Address:

2629 WAVERLY BARN ROAD,
122
DAVENPORT, FL 33897

FEI Number: 42-1633027

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JAMES WALKER, DAVID
2629 WAVERLY BARN ROAD, SUITE 123
DAVENPORT, FL 33897 US

Name and Address of New Registered Agent:

WALKER, DAVID J
2629 WAVERLY BARN ROAD,
122
DAVENPORT, FL 33897 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: DAVID J WALKER

04/30/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: WALKER, DAVID
Address: 2629 WAVERLY BARN ROAD, SUITE 123
City-St-Zip: DAVENPORT, FL 33897

Title: MGRM () Delete
Name: WALKER, SUSAN
Address: 2629 WAVERLY BARN ROAD, SUITE 123
City-St-Zip: DAVENPORT, FL 33897

Title: MGRM (X) Delete
Name: SMITH, DAVID
Address: 26 TOWN HILL BANK, OADIHAM LANCASHIRE
City-St-Zip: ENGLAND, BB1282H

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: DAVID J WALKER

MGRM

04/30/2005

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