

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000001615

FILED  
May 04, 2004  
Secretary of State

**Entity Name:** INTERNATIONAL MARKET DEVELOPMENT GROUP, LLC

**Current Principal Place of Business:**

12800 UNIVERSITY DR.  
SUITE 550  
FORT MYERS, FL 33907

**New Principal Place of Business:**

1500 COLONIAL BLVD.  
SUITE 102  
FORT MYERS, FL 33907

**Current Mailing Address:**

12800 UNIVERSITY DR.  
SUITE 550  
FORT MYERS, FL 33907

**New Mailing Address:**

1500 COLONIAL BLVD  
SUITE 102  
FORT MYERS, FL 33907

**FEI Number:** 65-0859727

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ANTONIC, JAMES P  
9111 SOUTHMONT COVE, SUITE 406  
FT. MYERS, FL 33908 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: MGR ( ) Delete  
Name: ANTONIC, IRENE R  
Address: 9111 SOUTHMONT COVE #406  
City-St-Zip: FORT MYERS, FL 33908

Title: MGR ( ) Delete  
Name: ANTONIC, JAMES P  
Address: 9111 SOUTHMONT COVE #406  
City-St-Zip: FORT MYERS, FL 33908

Title: MGR ( ) Delete  
Name: ANTONIC, GLENN P  
Address: 9111 SOUTHMONT COVE #406  
City-St-Zip: FORT MYERS, FL 33908

**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: JAMES P. ANTONIC

MGR

05/04/2004

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