2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 17, 2006
Secretary of State

DOCUMENT# L99000004223

Entity Name: INTERNATIONAL INNOVATIVE DESIGNS, L.L.C.

Current Principal Place of Business:

950 COUNTRY CLUB BOULEVARD
CAPE CORAL, FL 33990

New Principal Place of Business:

Current Mailing Address:

950 COUNTRY CLUB BOULEVARD
CAPE CORAL, FL 33990

New Mailing Address:

FEI Number: 65-0932955 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WUNDER, CHARLES A JR
950 COUNTRY CLUB BOULEVARD
CAPE CORAL, FL 33990 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/MANAGERS:

Title:	MGR	( ) Delete
Name:	WUNDER, CHARLES A	
Address:	950 COUNTRY CLUB BOULEVARD	
City-St-Zip:	CAPE CORAL, FL 33990	
Title:	MGR	( ) Delete
Name:	CAMPBELL, KEVIN	
Address:	3400 DELILAH DRIVE	
City-St-Zip:	CAPE CORAL, FL 33993	
Title:	MGR	( ) Delete
Name:	FABER, IAN	
Address:	3400 DELILAH DRIVE	
City-St-Zip:	CAPE CORAL, FL 33993	

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 Chapter 119, 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: CHARLES A. WUNDER, JR. P.E. MGR 01/17/2006

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