## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000066770

Entity Name: INTERNATIONAL IMPORTING CO INC

FILED May 11, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2315 DOVER 4683 ORANGE DR WESTON, FL 33326 DAVIE, FL 33314

Current Mailing Address: New Mailing Address:

2315 DOVER 4683 ORANGE DR WESTON, FL 33326 DAVIE, FL 33314

FEI Number: 35-2172110 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

VILLARREAL, MANUEL
2315 DOVER
WESTON, FL 33326 US
VILLARREAL, MANUEL
4683 ORANGE DR
DAVIE, FL 33314 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: 05/11/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: VILLARREAL, MANUEL Name: VILLARREAL, MANUEL Address: 2315 DOVER Address: 4683 ORANGE DR

 Address:
 2315 DOVER
 Address:
 4683 ORANGE DR

 City-St-Zip:
 WESTON, FL 33326
 City-St-Zip:
 DAVIE, FL 33314

Title: SD () Delete Title: SD (X) Change () Addition Name: VILLARREAL, LAURA Name: VILLARREAL, LAURA

 Address:
 2315 DOVER
 Address:
 4683 ORANGE DR

 City-St-Zip:
 WESTON, FL 33326
 City-St-Zip:
 DAVIE, FL 33314

Title: TD ( ) Delete Title: TD (X) Change ( ) Addition

 Name:
 VILLARREAL, ANNA
 Name:
 VILLARREAL, ANNA

 Address:
 2315 DOVER
 Address:
 4683 ORANGE DR

 City-St-Zip:
 WESTON, FL 33326
 City-St-Zip:
 DAVIE, FL 33314

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MANUEL VILLARREAL PD 05/11/2005