

2006 FOR PROFIT CORPORATION  
ANNUAL REPORT

DOCUMENT # P02000082546

1. Entity Name

IDG INTERNATIONAL DEVELOPMENT GROUP, INC.



Principal Place of Business

17850 W. DIXIE HWY, #2B  
NORTH MIAMI BEACH, FL 33160

Mailing Address

862 SUNFLOWER CIRC  
WESTON, FL 33327



02022006 No Chg-P CR2E034 (11/05)

4. FEI Number

48-1270515

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GROSMAN, PATRICIA  
862 SUNFLOWER CIRC  
WESTON, FL 33327

DO NOT WRITE  
IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P  
NAME GROSMAN, PATRICIA  
STREET ADDRESS 862 SUNFLOWER CIRC  
CITY-ST-ZIP WESTON, FL 33327

TITLE VP  
NAME FAERMAN, FABIO F  
STREET ADDRESS 862 SUNFLOWER CIRC  
CITY-ST-ZIP WESTON, FL 33327

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

11000000450635  
03/10/06-80013-019 150.00

DO NOT WRITE  
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-1-06

Date

786 262 9966

Daytime Phone #