

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000046297

FILED
Apr 28, 2006
Secretary of State

Entity Name: IDEAS IN WOOD CORPORATION

Current Principal Place of Business:

9460 NORTHWEST 13 STREET
BAY #69
DORAL, FL 33172

New Principal Place of Business:

Current Mailing Address:

12836 SW 17 TERRACE
MIAMI, FL 33175

New Mailing Address:

FEI Number: 55-0860567 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARRERAS, OMAR
12836 SW 17 TERRACE
MIAMI, FL 33175 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BARRERAS, OMAR
Address: 12836 SW 17 TERRACE
City-St-Zip: MIAMI, FL 33175

Title: S () Delete
Name: ESTEVEZ, IOALMIS
Address: 12836 SOUTHWEST 17 TERRACE
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BARRERAS, OMAR
Address: 12836 SW 17 TERRACE
City-St-Zip: MIAMI, FL 33175

Title: S (X) Change () Addition
Name: ESTEVEZ, IDALMIS
Address: 12836 SOUTHWEST 17 TERRACE
City-St-Zip: MIAMI, FL 33175

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 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: OMAR BARRERA

P

04/28/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date