2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000138459

City-St-Zip:

MIAMI, FL 33131

Entity Name: D. S. INTERNATIONAL WOOD CENTER, INC.

FILED Apr 10, 2007 Secretary of State

y			ren, invo.			
Current Principal Place of Business:				New Principal Place of Business:		
701 BRICKELL KEY BLVD. #2402 MIAMI, FL 33131				701 BRICKELL KEY BLVD. #2402 # 2402 MIAMI, FL 33131		
Current Mailing Address:				New Mailing Address:		
701 BRICKELL KEY BLVD. #2402 MIAMI, FL 33131				701 BRICKELL KEY BLVD. #2402 # 2402 MIAMI, FL 33131		
FEI Number: 20-1095951 FEI Number Applied For ()			FEI Nun	nber Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
IBRAHIM, SOBHI 701 BRICKELL KEY BLVD. #2402 MIAMI, FL 33131 US				IBRAHIM, SOBHI S G.M 701 BRICKELL KEY BLVD. #2402 # 2402 MIAMI, FL 33131 US		
	named entity : e of Florida.	submits this statement for the	e purpose o	f changing its registere	ed office or registered agent, or both,	
SIGNATURE: SOBHI IBRAHIM				04/10/2007		
	Electror	ic Signature of Registered A	gent		Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	IBRAHIM, SOB	KEY BLVD. #2402		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SHENOUDA, O	KEY BLVD. #2402		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	SHOHDI, SYLV) Delete IA KEY BLVD. #2402		Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: SOBHI IBRAHIM P 04/10/2007