

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)


05-09-2006 90067042 ***150.00
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FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # P05000163103	
1. Entity Name I WOOD INTERNATIONAL, INC.	

Principal Place of Business 1101 HILLWOOD DR. SANFORD FL 32771	Mailing Address 1101 HILLWOOD DR. SANFORD FL 32771
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2. Principal Place of Business 400 Chairman Court Suite, Apt. #, etc. Suite 400 City & State Debury, FL Zip 32713 Country U.S.A.	3. Mailing Address 400 Chairman Court Suite, Apt. #, etc. Suite 400 City & State Debury, FL Zip 32713 Country U.S.A.
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4. FEI Number
20-3943263

Applied For Not Applicable

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent JACOBS, HERMAN 1101 HILLWOOD DR. SANFORD FL 32771
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (NOTE: Registered Agent's signature required when reappointing) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P JACOBS, HERMAN 1101 HILLWOOD DR. SANFORD FL 32771 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP JACOBS, HERMAN 1101 HILLWOOD DR. SANFORD FL 32771 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:  Herman Jacobs 04/20/06 407-4159935
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DAYTIME PHONE #



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July 17, 2006

Florida Department of State
Division of Corporations
To: Mrs. Eula

Subject: I Wood International, Inc.

Reference number: P05000163103

I would like to notify you that we received a letter from you by July 8. This letter require complete block tour in the application form. This letter was posted in May 26 and received in our mail in July 8.

Nevertheless, we already have talked by phone and you included the information required in the system.

We will ask to consider avoiding late fee, in regardless of the date that we received the letter.

Herman Jacobs