2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000118612

Entity Name: INNOVATIVE DESIGN AND DEVELOPMENT GROUP, INC.

FILED Apr 05, 2009 Secretary of State

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

755 SE WHITMORE DR 2962 SW COASTAL TERRACE PORT ST LUCIE, FL 34984 FL PORT ST LUCIE, FL 34953 FL

Current Mailing Address: New Mailing Address:

755 SE WHITMORE DR 2962 SW COASTAL TERRACE PORT ST LUCIE, FL 34984 FL PORT ST LUCIE, FL 34953 FL

FEI Number: 26-1314867 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:

RAMONAS, KARL
755 SE WHITMORE DR
PORT ST LUCIE, FL 34984 US
RAMONAS, KARL
2962 SW COASTAL TERRACE
PORT ST LUCIE, FL 34953 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: 04/05/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 RAMONAS, KARL
 Name:
 RAMONAS, KARL

 Address:
 755 SE WHITMORE DR
 Address:
 2962 SW COASTAL TERRACE

 City-St-Zip:
 PORT ST LUCIE, FL 34984 US
 City-St-Zip:
 PORT ST LUCIE, FL 34953 US

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

Name:RAMONAS, ROCHELLEName:RAMONAS, ROCHELLEAddress:755 SE WHITMORE DRAddress:2962 SW COASTAL TERRACECity-St-Zip:PORT ST LUCIE, FL 34984 USCity-St-Zip:PORT ST LUCIE, FL 34953 US

I hereby certify that the information supplied with this filing does not qualify 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: KARL RAMONAS PD 04/05/2009