

# **2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P99000056391

**FILED**  
**Jul 11, 2005**  
**Secretary of State**

**Entity Name:** INWOOD INTERNATIONAL, INC.

**Current Principal Place of Business:**

178 GLADES RD  
BOCA RATON, FL 33432

**New Principal Place of Business:**

**Current Mailing Address:**

178 GLADES RD  
BOCA RATON, FL 33432

**New Mailing Address:**

**FEI Number:** 65-0927194

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DELFINO DE BARNI, BEATRIZ E  
178 GLADES RD  
BOCA RATON, FL 33432 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

**OFFICERS AND DIRECTORS:**

Title: PS ( ) Delete  
Name: DELFINO DE BARNI, BEATRIZ E  
Address: 178 GLADES RD  
City-St-Zip: BOCA RATON, FL 33432

Title: VT ( ) Delete  
Name: BARNI, ELVIO RAMON  
Address: 178 GLADES RD  
City-St-Zip: BOCA RATON, FL 33432

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PS (X) Change ( ) Addition  
Name: DELFINO DE BARNI, BEATRIZ E  
Address: 178 GLADES RD  
City-St-Zip: BOCA RATON, FL 33432 US

Title: VT (X) Change ( ) Addition  
Name: BARNI, ELVIO RAMON  
Address: 178 GLADES RD  
City-St-Zip: BOCA RATON, FL 33432 US

Title: MGR ( ) Change (X) Addition  
Name: BARNI, PAOLO R  
Address: 178 GLADES RD  
City-St-Zip: BOCA RATON, FL 33432 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BEATRIZ BARNI

PS

07/11/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date