

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000074016

FILED  
Sep 11, 2007  
Secretary of State

**Entity Name:** INTERNATIONAL DEVELOPERS GROUP, L.L.C.

**Current Principal Place of Business:**

7890 SW 122 STREET  
PINECREST, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

7890 SW 122 STREET  
PINECREST, FL 33156

**New Mailing Address:**

8324 SW 65 AVE #4  
MIAMI, FL 33143

FEI Number: 20-3214227      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

KALKAS, MARTTI  
245 SE 1ST STREET, SUTIE 225  
MIAMI, FL 33131    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

**MANAGING MEMBERS/MANAGERS:**

Title:            MGR            ( ) Delete  
Name:            RODRIGUEZ, JUAN  
Address:        16720 SW 86 COURT  
City-St-Zip:    PALMETTO BAY, FL 33157

**ADDITIONS/CHANGES:**

Title:            MGR            (X) Change ( ) Addition  
Name:            RODRIGUEZ, JUAN  
Address:        8324 SW 65 AVE #4  
City-St-Zip:    MIAMI, FL 33143

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JUAN RODRIGUEZ

MGR

09/11/2007

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date