

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000022794

FILED
Jul 26, 2007
Secretary of State

Entity Name: MEGA INTERNATIONAL DISTRIBUTORS CORP.

Current Principal Place of Business:

9805 NW 52ND STREET
SUITE 516
DORAL, FL 33178

New Principal Place of Business:

Current Mailing Address:

9805 NW 52ND STREET
SUITE 516
DORAL, FL 33178

New Mailing Address:

FEI Number: 02-0555517 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GARCIA, MANUEL
9805 NW 52ND STREET
SUITE 516
DORAL, FL 33178 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MELLA FEBLES, CARLOS MANUEL
Address: 9805 NW 52ND STREET #516
City-St-Zip: DORAL, FL 33178

Title: VD () Delete
Name: MANUEL, GARCIA
Address: 9805 NW 52ND STREET # 516
City-St-Zip: DORAL, FL 33178

Title: SD () Delete
Name: PABLO DE MELLA, ROSA MARIA
Address: 9805 NW 52ND STREET #516
City-St-Zip: DORAL, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CARLOS M. MELLA

_____ Electronic Signature of Signing Officer or Director

MR

07/26/2007

_____ Date