

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000042558

FILED  
Apr 27, 2006  
Secretary of State

Entity Name: ADVANTAGE INTERNATIONAL DISTRIBUTORS, INC.

**Current Principal Place of Business:**

4100 N.E. 2ND AVENUE  
SUITE 320  
MIAMI, FL 33137

**New Principal Place of Business:**

**Current Mailing Address:**

4100 N.E. 2ND AVENUE  
SUITE 320  
MIAMI, FL 33137

**New Mailing Address:**

FEI Number: 65-0422360      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CAZALET, JEAN  
4100 N.E. 2ND AVENUE, #320  
MIAMI, FL 33137 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: CAZALET, JEAN  
Address: 4100 N.E. 2ND AVENUE, #320  
City-St-Zip: MIAMI, FL 33137

Title: D ( ) Delete  
Name: HELFRICH, JOSEPH  
Address: 4100 2ND AVE #320  
City-St-Zip: MIAMI, FL 33137

Title: D ( ) Delete  
Name: ZWINGER, LAURENCE  
Address: 4100 NE 2ND AVE #320  
City-St-Zip: MIAMI, FL 33137

Title: D ( ) Delete  
Name: JEAN, CHANEL PAUL  
Address: 4100 NE 2ND #320  
City-St-Zip: MIAMI, FL 33137

**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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: HERBERT WILLIAMS

MGR

04/27/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date