## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000042558

Entity Name: ADVANTAGE INTERNATIONAL DISTRIBUTORS, INC.

FILED Feb 17, 2009 Secretary of State

1101 BRICKELL AVENUE SUITE 400 SOUTH TOWER BOX 15 MIAMI, FL 33131

**Current Mailing Address:** 

**New Mailing Address:** 

1101 BRICKELL AVENUE SUITE 400 SOUTH TOWER BOX 15 MIAMI, FL 33131

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

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

LAW OFFICES OF CLIFFORD KORNFIELD, P.A. 11400 SW 68 CT. MIAMI, FL 33156 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:

Electronic Signature of Registered Agent Date

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

1101 BRICKELL AVE SUITE 400 SOUTH TOWER

(X) Change ( ) Addition

1101 BRICKELL AVE SUITE 400 SOUTH TOWER

Title: ( ) Delete HELFRICH, JOSEPH Name:

4100 2ND AVE #320 Address:

City-St-Zip: MIAMI, FL 33137

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

Title: VD ( ) Delete STRUB, ELIZABETH Name: 4100 N.E. 2ND AVENUE Address:

City-St-Zip: MIAMI, FL 33137

Title: STD () Delete GUYOT, MARTINE Name:

Address: 4100 N.E. 2ND AVENUE City-St-Zip: MIAMI, FL 33137

Title: (X) Change ( ) Addition VD

MIAMI, FL 33131

HELFRICH, JOSEPH

ZWINGER, LAURENCE

MIAMI, FL 33131

STRUB, ELIZABETH Name:

1101 BRICKELL AVE SUITE 400 SOUTH TOWER Address:

City-St-Zip: MIAMI, FL 33131

Title: STD (X) Change ( ) Addition

GUYOT, MARTINE Name:

Address: 1101 BRICKELL AVE SUITE 400 SOUTH TOWER

City-St-Zip: MIAMI, FL 33131

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: MARTINE GUYOT STD 02/17/2009