

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000049053

FILED  
Jan 11, 2010  
Secretary of State

**Entity Name:** ACTIVE MEDIA DISTRIBUTION, INC.

**Current Principal Place of Business:**

9 ISLAND AVENUE  
SUITE #1904  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

9 ISLAND AVENUE  
SUITE #1904  
MIAMI BEACH, FL 33139

**New Mailing Address:**

**FEI Number:** 59-3453547      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

PENA, ANA K  
9 ISLAND AVENUE  
SUITE #1904  
MIAMI BEACH, FL 33139 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  
**Name:** PENA, ANA K  
**Address:** 9 ISLAND AVENUE, SUITE#1904  
**City-St-Zip:** MIAMI BEACH, FL 33139

**Title:** T  
**Name:** PENA, JOSE E  
**Address:** 9 ISLAND AVENUE, #1904  
**City-St-Zip:** MIAMI BEACH, FL 33139

I hereby 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 all other like empowered.

SIGNATURE: ANA KARINA PENA

D

01/11/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date