2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000170

FILED Apr 26, 2007 Secretary of State

Entity Nai	me: HUDD D	STRIBUTION SERVICES, INC.				
Current Principal Place of Business:			New Principal Place of Business:			
	STONE PLAC ATE, CA 9028					
Current Mailing Address:			New Mailing Address:			
TAX DEPA P.O. BOX MADISON						
FEI Number:	: 95-3761174	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired ()		
Name and	Address of C	Current Registered Agent:	Name and	Address of New Registered Agent:		
MEDLEY, The above	106TH STRE FL 33178 l	JS	urpose of changing i	ts registered office or registered agent, or both,		
SIGNATUR						
01011/1101		nic Signature of Registered Age	nt	 Date		
Election Car	npaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	WHITE, MICHA	RMS, MADISON AVENUE	Title: Name: Address: City-St-Zip:	CD (X) Change () Addition WHITE, MICHAEL J 7 GIRALDA FARMS, MADISON AVENUE MADISON, NJ 07940		
Title: Name: Address: City-St-Zip:	CHIARELLO, A	RMS, MADISON AVENUE	Title: Name: Address: City-St-Zip:	P (X) Change () Addition TARO, NICHOLAS 7 GIRALDA FARMS, MADISON AVENUE MADISON, NJ 07940		
Title: Name: Address: City-St-Zip:	ANDERSON, J	RMS, MADISON AVENUE	Title: Name: Address: City-St-Zip:	S (X) Change () Addition ANDERSEN, JAN K 7 GIRALDA FARMS, MADISON AVENUE MADISON, NJ 07940		
Title: Name: Address: City-St-Zip:	T (GREEN, COLIN 5011 FIRESTO SOUTHGATE, 0	NE PLACE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP (MURRAY, WIL 5011 FIRESTO SOUTHGATE, (NE PLACE	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition MOLLER, HANS S 7 GIRALDA FARMS, MADISON AVENUE MADISON, NJ 07940		

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: JAN K ANDERSEN 04/26/2007 S