2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 07, 2008 08:00 AN Secretary of State DOCUMENT # F03000002144 1. Entity Name ADI AMERICAN DISTRIBUTORS INC. Principal Place of Business Mailing Address 2 EMERY AVE. 2 EMERY AVE. RANDOLPH, NJ 07869 RANDOLPH, NJ 07869 CR2E034 (11/05) 01032008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 22-2538240 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LOVERIDGE, DIANA DO NOT WRITE 1417 BRONCO DRIVE MELBOURNE, FL 32940 IN THIS SPACE 8. 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. Lam familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE BECK, DAVID NAME STREET ADDRESS 2 EMERY AVE. CITY-ST-ZIP RANDOLPH, NJ 07869 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other tike empowered.

SIGNATURE:

CITY-ST-ZIP TITLE

STREET ADDRESS City-St-7IP