## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F06000000408

Title:

Name:

Address: City-St-Zip:

Entity Name: INTERNATIONAL LUXURY DISTRIBUTION, INC.

FILED Feb 18, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
% EDWARDS ANGELL PALMER & DODGE LLP 1 N. CLEMATIS STREET, STE 400 WEST PALM BEACH, FL 33401				EDWARDS, ANGELL E 1 N. CLEMATIS STREE WEST PALM BEACH,	ET, STE 400	
Current Mailing Address:				New Mailing Address:		
% EDWARDS ANGELL PALMER & DODGE LLP 1 N. CLEMATIS STREET, STE 400 WEST PALM BEACH, FL 33401				EDWARDS, ANGELL ET AL ATTN: GEY 1 N. CLEMATIS STREET, STE 400 WEST PALM BEACH, FL 33401		
FEI Number:	20-4145816	FEI Number Applied For ( )	FEI Nun	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
ANGELL CORPORATE SERVICES, INC. ONE NORTH CLEMATIS STREET SUITE 400 WEST PALM BEACH, FL 33401 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.						
SIGNATUR	RE:					
Electronic Signature of Registered Agent					Date	
Election Can	npaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	RAGAZZI, WAL % C.G.FS.R.L	) Delete .TER VIA BORSIERI NO 15 100 ITALY, OC		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	RAGAZZI, CEC % C.G.FS.R.L	) Delete :ILIA VIA BORSIERI NO 15 100 ITALY, OC		Title: Name: Address: City-St-Zip:	()Change ()Addition	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: GREGORY E. YOUNG, ASSISTANT SECRETARY

( ) Delete

WEST PALM BEACH, FL 33401 OC

ONE N. CLEMATIS STREET, SUITE 400

YOUNG, GREGORY E

AS

02/18/2009

(X) Change ( ) Addition

ONE N. CLEMATIS STREET, SUITE 400

WEST PALM BEACH, FL 33401

YOUNG, GREGORY E