

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000001414

FILED
Jan 25, 2012
Secretary of State

Entity Name: ANCOR DISTRIBUTION MANAGEMENT (PTY.) LTD. CORP.

Current Principal Place of Business:

GILLOOLY'S VIEW OFFICE PARK, OSBORNE LANE
GROUND FLOOR, BLOCK A, BEDFORDVIEW
GAUTENG 2008 SOUTH AFRICA,

New Principal Place of Business:

8190 WOODLAND CENTER BOULEVARD
TAMPA, FL 33614 US

Current Mailing Address:

GILLOOLY'S VIEW OFFICE PARK, OSBORNE LANE
GROUND FLOOR, BLOCK A, BEDFORDVIEW
GAUTENG 2008 SOUTH AFRICA,

New Mailing Address:

8190 WOODLAND CENTER BOULEVARD
TAMPA, FL 33614 US

FEI Number: 45-1644629

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LAW OFFICES OF GRANT KAPLAN, P.A.
7100 W. CAMINO REAL, SUITE 100
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

FOUCHE, ANDRE G
12020 MERIDIAN POINT DRIVE
TAMPA, FL 33626 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: ANDRE G FOUCHE

01/25/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VCPV
Name: KUHN, NICHOLAS G
Address: 2 DUNVEGAN ESTATES, 22 LEN OATES RD
City-St-Zip: DUNVEGAN, GAUTENG, OC 1602 OC

Title: VCPV
Name: FOUCHE, ANDRE G
Address: 12020 MERIDIAN POINT DRIVE
City-St-Zip: TAMPA, FL 33626 US

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: ANDRE G FOUCHE

VCPV

01/25/2012

Electronic Signature of Signing Officer or Director

Date