2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000005025

Entity Name: ADIDAS PROMOTIONAL RETAIL OPERATIONS, INC.

FILED Jan 15, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
	REELEY AV D, OR 97217	US		5055 N GREELEY AVENUE PORTLAND, OR 97217 US		
Current Mailing Address:				New Mailing Address:		
5055 N. GREELEY AV PORTLAND, OR 97217		US		SUITE 230	IFTH AVENU 0 D, OR 97201	E US
FEI Number: 93-1114590 FEI Number		FEI Number Applied For ()	FEI Num	nber Not Applicable ()		Certificate of Status Desired ()
Name and	Address of Cu	rrent Registered Agent:	Name and	Address of I	New Registered Agent:	
1200 SOU PLANTATI The above	ORATION SYSTH PINE ISLANION, FL 33324 named entity subset of Florida.	D ROAD US	rpose of	⁻ changing i	ts registered o	office or registered agent, or both,
SIGNATUR						
Electronic Signature of Registered Agent				Date		
Election Car	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CD () E STAMMINGER, E 5055 N. GREELE PORTLAND, OR	Y AV		Title: Name: Address: City-St-Zip:	DIR (X STAMMINGER 5055 N GREEL PORTLAND, O	EY AVENUE
Title: Name: Address: City-St-Zip:	CFO () E SCHMIDTMANN, 5055 N GREELE PORTLAND, OR	Y AV		Title: Name: Address: City-St-Zip:	CEO (X STAMMINGER 5055 N GREEL PORTLAND, O	EY AVENUE
Title: Name: Address: City-St-Zip:	S ()E EHRLICH, PAUL 5055 N GREELE PORTLAND, OR			Title: Name: Address: City-St-Zip:	NILSSON, PAT 5055 N GREEL	LEY AVENUE
Title: Name: Address: City-St-Zip:	TO () E MCGUIRE, JIM 5055 N. GREELE PORTLAND, OR	Y AV.		Title: Name: Address: City-St-Zip:	SEC (X EHRLICH, PAU 5055 N GREEL PORTLAND, O	LEY AVENUE
Title: Name: Address: City-St-Zip:	P () C NILSSON, PATRI 5055 N. GREELE PORTLAND, OR	Y AV.		Title: Name: Address: City-St-Zip:	CFO (X CUNIFF, JAME 5055 N GREEL PORTLAND, O	LEY AVENUE
Title: Name: Address: City-St-Zip:	() [Delete		Title: Name: Address: City-St-Zip:	TAX (MAGUIRE, JAN 5055 N GREEL PORTLAND, O	LEY AVENUE

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.

SIGNATURE: NANCY B. MILLER ATTY 01/15/2008