

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000013596

Entity Name: ICON DISTRIBUTION, LLC

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

3956 TOWN CENTER BLVD., SUITE 122
ORLANDO, FL 32837

New Principal Place of Business:

Current Mailing Address:

3956 TOWN CENTER BLVD., SUITE 122
ORLANDO, FL 32837

New Mailing Address:

FEI Number: 72-1566600

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLICK, JAMES J
608 EAST CENTRAL BLVD.
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SHARMA, ASHEEM
Address: 3956 TOWN CENTER BLVD., 22
City-St-Zip: ORLANDO, FL 32837

Title: MGRM () Delete
Name: SHARMA, IRENE
Address: 3956 TOWN CENTER BLVD., 22
City-St-Zip: ORLANDO, FL 32837

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SHARMA, ASHEEM
Address: 3956 TOWN CENTER BLVD., SUITE 122
City-St-Zip: ORLANDO, FL 32837

Title: MGRM (X) Change () Addition
Name: SHARMA, IRENE
Address: 3956 TOWN CENTER BLVD., SUITE 122
City-St-Zip: ORLANDO, FL 32837

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: IRENE SHARMA

MGRM

04/30/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date