2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 16, 2008
Secretary of State

DOCUMENT# L06000111456

Entity Name: ALL AMERICA DISTRIBUTION LLC

Current Principal Place of Business:

23000 PORTOFINO CIRCLE, APT. 111
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

15430 ENDEAVOUR DR
JUPITER, FL 33478

Current Mailing Address:

23000 PORTOFINO CIRCLE, APT. 111
PALM BEACH GARDENS, FL 33418

New Mailing Address:

15430 ENDEAVOUR DR
JUPITER, FL 33478

FEI Number: 20-5906448 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

INTERNICOLA, PAOLO
23000 PORTOFINO C.LE
111
PALM BEACH GARDENS, FL 33418 US

Name and Address of New Registered Agent:

INTERNICOLA, PAOLO
911 MILL CREEK DR
PALM BEACH GARDENS, FL 33410 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: PAOLO INTERNICOLA 06/16/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: INTERNICOLA, PAOLO
Address: 23000 PORTOFINO CIRCLE, APT. 111
City-St-Zip: PALM BEACH GARDENS, FL 33418

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: INTERNICOLA, PAOLO
Address: 911 MILL CREEK DR
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: PAOLO INTERNICOLA MR 06/16/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date