

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000005502

FILED  
Feb 06, 2008  
Secretary of State

Entity Name: AVIEMORE DISTRIBUTORS, INC.

## Current Principal Place of Business:

13100 NW 113TH AVENUE ROAD  
SUITE #1  
MEDLEY, FL 33178

## New Principal Place of Business:

## Current Mailing Address:

13100 NW 113TH AVENUE ROAD  
SUITE #1  
MEDLEY, FL 33178

## New Mailing Address:

FEI Number: 65-0981801

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HAY, WILLIAM R. D  
13100 NW 113TH AVENUE ROAD  
SUITE #1  
MEDLEY, FL 33178 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: HAY, WILLIAM  
Address: 1629 VICTORIA POINTE LANE  
City-St-Zip: WESTON, FL 33327

Title: VSD ( ) Delete  
Name: BROWNING, GLENN  
Address: 8625 CARIBBEAN BLVD.  
City-St-Zip: MIAMI, FL 33157

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: WILLIAM HAY

P

02/06/2008

Electronic Signature of Signing Officer or Director

Date