2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007
Secretary of State

DOCUMENT# P01000058590

Entity Name: TOP AMERICAN DISTRIBUTORS, INC

Current Principal Place of Business:

145 MADEIRA AVE
SUITE 203
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

145 MADEIRA AVE
SUITE 203
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 65-1112251 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AGUIRRE, RAMON
1100 SALZEDO STREET
APT 1-A
CORAL GABLES,, FL 33134 US

Name and Address of New Registered Agent:

AGUIRRE, RAMON
29 SANTILLANE AVE
APT 9
CORAL GABLES,, FL 33134 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: RAMON AGUIRRE 05/01/2007
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: AGUIRRE, RAMON
Address: 1100 SALZEDO STREET
City-St-Zip: APT 1-A, FL 33134

Title: DV ( ) Delete
Name: ASHUH, SARAH A
Address: 3340 NW 4 ST
City-St-Zip: MIAMI, FL 33125

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: AGUIRRE, RAMON
Address: 29 SANTILLANE AVE APT 9
City-St-Zip: CORAL GABLES, FL 33134

Title: DV (X) Change ( ) Addition
Name: ASHUH, SARAH A
Address: 29 SANTILLANE AVE APT 9
City-St-Zip: CORAL GABLES, FL 33134

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: RAMON AGUIRRE DP 05/01/2007
Electronic Signature of Signing Officer or Director Date