2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000078618

1. Entity Name

RESÉARCH, PRODUCTION & DISTRIBUTION INTERNATIONAL, INC.

FILED Aug 13, 2008 08:00 AM Secretary of State

Principal Place of Business

4812 PINE TREE DR UNIT 101

MIAMI BEACH, FL 33140

Mailing Address

4812 PINE TREE DR UNIT 101

MIAMI BEACH, FL 33140



DO NOT WRITE IN THIS SPACE

07152008 No Chg-P CR2E034 (11/05)

4. F il Number 65-1138845 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

CRESPI, DANILA 4812 PINE TREE DR #101 MIAMI BEACH, FL 33140

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	e named entity submits this statement for the tions of registered agent.	purpose of changing its registered	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and bit	le il applicable (NOTE Registered	Agent signature	required when is: stating)	DATE
	LE NOW!!! FEE IS \$150.00 ue by September 12, 2008	Election Campaign Financ Trust Fund Contribution.	oing	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice
10.	OFFICERS AND DIRECTORS				
TITLE	Р				
NAME	CRESPI, DANILA				
STREET ADDRESS	4812 PINE TREE DR. #101				
CITY-\$1-ZIP	MIAMI BEACH, FL 33140				
DILE					
NAMÉ					U000009\$7602
STREET ADDRESS					08/13/08-80001-009 158.75
CITY-ST-ZIP					00/13/00 00001 003 130.13
TITLE					
NAME					
STREET ADDRESS	1			20	NOTME

DO NOT WRITE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same Figal 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: L

CITY-ST-ZIP

NAME STREET ADDRESS CITY - ST- 7/P

NAME STREET ADORESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRIMED WANTE OF SIGNING

DANILA CRESTI

Aug. 11 200B

Davime Phone #