

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000031988

Entity Name: ACD AMERICA CORPORATION

FILED
Sep 14, 2009
Secretary of State

Current Principal Place of Business:

3559 NW. 82 AVENUE
MIAMI, FL 33122 US

New Principal Place of Business:

Current Mailing Address:

3559 NW. 82 AVENUE
MIAMI, FL 33122 US

New Mailing Address:

FEI Number: 43-2009485

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IGLESIAS, ADOLFO E
13170 SW. 128 ST.
SUITE 203
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

IGLESIAS, ADOLFO E
12060 SW 129 CT
SUITE 104
MIAMI, FL 33186 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: ADOLFO E IGLESIAS

09/14/2009

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: ROJAS, ANGEL E
Address: 3559 NW. 82 AVE
City-St-Zip: MIAMI, FL 33122 US

Title: DV () Delete
Name: BELLO, ROSA M
Address: 3559 NW. 82 AVE
City-St-Zip: MIAMI, FL 33122 US

Title: S () Delete
Name: MARCANO, NATACHA
Address: 11239 NW. 57 LANE
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: ROJAS, ANGEL E
Address: 11239 NW. 57 LANE
City-St-Zip: MIAMI, FL 33178

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: ANGEL E ROJAS

DP

09/14/2009

Electronic Signature of Signing Officer or Director

Date