

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000121305

FILED
Apr 29, 2008
Secretary of State

Entity Name: ASSETS DISTRIBUTION GROUP, INC.

Current Principal Place of Business:

9106 NW 106 STREET
MEDLEY, FL 33178

New Principal Place of Business:

Current Mailing Address:

9106 NW 106 STREET
MEDLEY, FL 33178

New Mailing Address:

FEI Number: 20-0364164

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DERVISHI, BRIAN S ESQ.
ONE SOUTHEAST THIRD AVENUE
SUITE 1980
MIAMI, FL 33131 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: P () Delete
Name: MARTINEZ TEJADA, LUIS EDUARDO
Address: ONE SOUTHEAST THIRD AVENUE, STE 1980
City-St-Zip: MIAMI, FL 33131 US

Title: VP () Delete
Name: BAHAMON FALLA, MARIA MAGDALEN
Address: ONE SOUTHEAST THIRD AVENUE, STE 1980
City-St-Zip: MIAMI, FL 33131 US

Title: T () Delete
Name: TRUJILLO, ANDRES
Address: ONE SOUTHEAST THIRD AVENUE
City-St-Zip: MIAMI, FL 33131 US

Title: S () Delete
Name: SILVESTRE M, MARIA A
Address: 9106 NW 106 STREET
City-St-Zip: MEDLEY, FL 33178 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: MARIA A SILVESTRE

S

04/29/2008

Electronic Signature of Signing Officer or Director

Date