

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000041795

Entity Name: N.C.D. INC.

FILED
Nov 28, 2007
Secretary of State

Current Principal Place of Business:

1630 E. IRLO BRONSON HWY.
KISSIMMEE, FL 34744

New Principal Place of Business:

1410 E. VINE ST.
KISSIMMEE, FL 34744

Current Mailing Address:

1630 E. IRLO BRONSON HWY.
KISSIMMEE, FL 34744

New Mailing Address:

1410 E. VINE ST.
KISSIMMEE, FL 34744

FEI Number: 75-3148067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RIVERA, DAVID
512 CARLSBAD DR.
KISSIMMEE, FL 34758 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RIVERA, CELSO
Address: 367 SO. PARK ST.
City-St-Zip: BENSENVILLE, IL 60106

Title: VPT () Delete
Name: RIVERA, DAVID
Address: 512 CARLSBAD DR.
City-St-Zip: KISSIMMEE, FL 34758

Title: S () Delete
Name: ALEMAN, MARIO
Address: 2506 TRAPSIDE CT.
City-St-Zip: KISSIMMEE, FL 34746

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: RIVERA, DAVID
Address: 512 CARLSBAD DR.
City-St-Zip: KISSIMMEE, FL 34758

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: DAVID RIVERA

VPTS

11/28/2007

Electronic Signature of Signing Officer or Director

Date