

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000060980

Entity Name: C. O. DISTRIBUTION, INC.

FILED
Mar 24, 2006
Secretary of State

Current Principal Place of Business:

101 MADEIRA AVENUE
CORAL GABLES, FL 33134 US

New Principal Place of Business:

PO BOX 0487
MIAMI, FL 33245 US

Current Mailing Address:

101 MADEIRA AVENUE
CORAL GABLES, FL 33134 US

New Mailing Address:

PO BOX 0487
MIAMI, FL 33245 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

XIQUES, ALBERT J
101 MADEIRA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

XIQUES, ALBERT J
748 NAVARRE AVENUE
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:

03/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: XIQUES, ALBERTO J
Address: 101 MADEIRA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: XIQUES, ALBERTO J
Address: PO BOX 0487
City-St-Zip: MIAMI, FL 33245

I hereby certify that the information supplied with this filing does not qualify for the 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: ALBERT J. XIQUES

P

03/24/2006

Electronic Signature of Signing Officer or Director

Date