2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 25, 2006
Secretary of State

DOCUMENT# P04000147415

Entity Name: D.A.M. INTERNATIONAL DISTRIBUTOR, CORP.

Current Principal Place of Business:

13840 SW 112 STREET SUITE 208
MIAMI, FL 33186

New Principal Place of Business:

3235 NW 62ND STREET
MIAMI, FL 33147

Current Mailing Address:

13840 SW 112 STREET SUITE 208
MIAMI, FL 33186

New Mailing Address:

3235 NW 62ND STREET
MIAMI, FL 33147

FEI Number: 20-1814085 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RIVAS, MAYRA E
13840 SW 112 STREET SUITE 208
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

RIVAS, MAYRA E
3235 NW 62ND STREET
MIAMI, FL 33147 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: 07/25/2006
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: PD ( ) Delete
Name: RIVAS, MAYRA
Address: 13840 SW 112 STREET SUITE 208
City-St-Zip: MIAMI, FL 33186

Title: VS ( ) Delete
Name: ACEVEDO, DAVID A
Address: 13840 SW 112 STREET STE208
City-St-Zip: MIAMI, FL 33186

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: RIVAS, MAYRA
Address: 3235 NW 62ND STREET
City-St-Zip: MIAMI, FL 33147

Title: V (X) Change ( ) Addition
Name: ACEVEDO, DAVID A
Address: 3235 NW 62ND STREET
City-St-Zip: MIAMI, FL 33147

Title: T ( ) Change (X) Addition
Name: COHEN, ALICIA T
Address: 3235 NW 62ND STREET
City-St-Zip: MIAMI, FL 33147

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: MAYRA RIVAS P 07/25/2006
Electronic Signature of Signing Officer or Director — Date