

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000043427

FILED  
Jan 03, 2007  
Secretary of State

Entity Name: BIGALE DISTRIBUTION SERVICES CORP

## Current Principal Place of Business:

504 SE 13TH DR  
DEERFIELD BEACH, FL 33441

## New Principal Place of Business:

2965 SW 22ND AVE  
108  
DELRAY BEACH, FL 33445

## Current Mailing Address:

504 SE 13TH DR  
DEERFIELD BEACH, FL 33441

## New Mailing Address:

2965 SW 22ND AVE  
108  
DELRAY BEACH, FL 33445

FEI Number: 20-2632002

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FUERTES, ALEXANDRE A  
608 NE 16 AVE  
APT # 1  
FORT LAUDERDALE, FL 33304 US

## Name and Address of New Registered Agent:

FUERTES, ALEXANDRE A  
2965 SW 22ND AVE  
108  
DELRAY BEACH, FL 33445 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:

01/03/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FUERTES, ALEXANDRE A  
Address: 608 NE 16 AVE # 1  
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: VP ( ) Delete  
Name: JONES, GABRIELLE M SCHMITT  
Address: 504 SE 13TH DR  
City-St-Zip: DEERFIELD BEACH, FL 33441

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FUERTES, ALEXANDRE A  
Address: 2965 SW 22ND AVE # 108  
City-St-Zip: DELRAY BEACH, FL 33445

Title: VP (X) Change ( ) Addition  
Name: JONES, GABRIELLE M SCHMITT  
Address: 2965 SW 22ND AVE # 108  
City-St-Zip: DELRAY BEACH, FL 33445

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: GABRIELLE SCHMITT MOURA JONES

VP

01/03/2007

Electronic Signature of Signing Officer or Director

Date