## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000080388

Entity Name: ADALDA UNLIMITED CORP.

FILED Jan 06, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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474 LONGMEADOW LANE
LONGWOOD, FL 32779 US
3030 EAST SEMORAN BLVD
SUITE 184

APOPKA, FL 32703 US

Current Mailing Address: New Mailing Address:

474 LONGMEADOW LANE
LONGWOOD, FL 32779 US
3030 EAST SEMORAN BLVD
SUITE 184

APOPKA, FL 32703 US

FEI Number: 20-2940665 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STEINFELD, EDWARD

474 LONGMEADOW LANE

LONGWOOD, FL 32779 US

CABOODLE CARTRIDGE
3030 EAST SEMORAN BLVD
SUITE 184
APOPKA, FL 32703 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: MARLENE STEINFELD 01/06/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition

 Name:
 STEINFELD, MARLENE
 Name:

 Address:
 474 LONGMEADOW LANE
 Address:

 City-St-Zip:
 LONGWOOD, FL 32779 US
 City-St-Zip:

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition

Name:MARGOT, PHILIPName:MARGOT, HARRIETAddress:581 SAFEHARBOUR DRIVEAddress:552 TWISTING PINE CTCity-St-Zip:OCOEE, FL 34761 USCity-St-Zip:LONGWOOD, FL 32779 US

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: MARLENE STEINFELD PD 01/06/2007