2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000103962

Entity Name: KADPROD, INC.

FILED Feb 16, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Dusiness.	New Fillicipal Flace of Dusiliess.

C/O JADE ASSOCIATES 100 N BISCAYNE BLVD, SUITE 500 MIAMI, FL 33132 US

Current Mailing Address: New Mailing Address:

C/O JADE ASSOCIATES 100 N BISCAYNE BLVD, SUITE 500 MIAMI, FL 33132 US

FEI Number: 20-3214897 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:

COOPER, GLENN M 150 SOUTH PINE ISLAND RD SUITE 105 PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: KADOUCH, CYRIL Name: LAPIERRE, ARNAUD

Address: 3447 CHASE AVE. Address: C/O JADE ASSOC,100 N BISCAYNE BLVD #500

City-St-Zip: MIAMI, FL 33140 City-St-Zip: MIAMI, FL 33132 US

Title: DVP () Delete Title: VP (X) Change () Addition

Name: LAPIERRE, ARNAULD Name: DARBY, SANDRINE

Address: C/O JADE ASSOC, 100 N BISCAYNE BLVD # 500 Address: C/O JADE ASSOC, 100 N BISCAYNE BLVD # 500

City-St-Zip: MIAMI, FL 33132 US City-St-Zip: MIAMI, FL 33132 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: ARNAUD LAPIERRE DP 02/16/2007