

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000115548

**FILED**  
**Jan 11, 2012**  
**Secretary of State**

**Entity Name:** CELLRUNNERS DISTRIBUTION CORP.

**Current Principal Place of Business:**

1701 GREEN ROAD  
SUITE H  
DEERFIELD BEACH, FL 33069

**New Principal Place of Business:**

**Current Mailing Address:**

1701 GREEN ROAD  
SUITE H  
DEERFIELD BEACH, FL 33064

**New Mailing Address:**

**FEI Number:** 20-3320135

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COLAVECCHIO, JOHN  
1701 GREEN ROAD  
SUITE H  
DEERFIELD BEACH, FL 33064 US

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

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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** MOCARSKI, MATTHEW  
**Address:** 1701 GREEN ROAD SUITE H  
**City-St-Zip:** DEERFIELD BEACH, FL 333064

**Title:** VP  
**Name:** COLAVECCHIO, JOHN  
**Address:** 1701 GREEN ROAD SUITE H  
**City-St-Zip:** DEERFIELD BEACH, FL 33064

I hereby 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 all other like empowered.

**SIGNATURE:** JOHN COLAVECHIO

VP

01/11/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date