## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000001079

Entity Name: LION DISTRIBUTOR CORP.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8331 NW 68 ST 8345 NW 68 ST MIAMI, FL 33166 MIAMI, FL 33166

Current Mailing Address: New Mailing Address:

8331 NW 68 ST 8345 NW 68 ST MIAMI, FL 33166 MIAMI, FL 33166

FEI Number: 20-4011479 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:

LEON, JULIO P
8331 NW 68 ST
MIAMI, FL 33166 US

LEON, JULIO P
8345 NW 68 ST
MIAMI, FL 33166 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: JULIO LEON 04/30/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 LEON, JULIO
 Name:
 LEON, JULIO

 Address:
 8331 NW 68 ST
 Address:
 8345 NW 68 ST

Address: 833 NW 68 ST Address: 8345 NW 68 ST City-St-Zip: MIAMI, FL 33166 City-St-Zip: MIAMI, FL 33166

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition Name: LEON, JULIO Name: LEON, JULIO

 Address:
 8331 NW 68 ST
 Address:
 8345 NW 68 ST

 City-St-Zip:
 MIAMI, FL 33166
 City-St-Zip:
 MIAMI, FL 33166

 $\label{eq:title:S} {\sf Title:} \qquad {\sf S} \qquad {\sf ( ) Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad {\sf (X) Change ( ) Addition}$ 

 Name:
 LEON, JULIO
 Name:
 LEON, JULIO

 Address:
 8331 NW 68 ST
 Address:
 8345 NW 68 ST

 City-St-Zip:
 MIAMI, FL 33166
 City-St-Zip:
 MIAMI, FL 33166

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

 Name:
 LEON, JULIO
 Name:
 LEON, JULIO

 Address:
 8331 NW 68 ST
 Address:
 8345 NW 68 ST

 City-St-Zip:
 MIAMI, FL 33166
 City-St-Zip:
 MIAMI, FL 33166

I hereby certify that the information supplied with this filing does not qualify 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: JULIO LEON P 04/30/2008