

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2007 8:00 am
Secretary of State

02-27-2007 90003 039 ***150.00

DOCUMENT # P06000106221 1. Entity Name KAD ELECTRONICS (FLORIDA), INC.																								
Principal Place of Business 1611 NW 84 AVE MIAMI, FL 33126 US		Mailing Address 18999 BISCAYNE BLVD STE 205 AVENTURA, FL 33180 US																						
2. Principal Place of Business, No P.O. Box # 2158 NW 82 AVE Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																						
City & State MIAMI, FL		City & State																						
Zip 33122	Country USA	Zip	Country																					
4. FEI Number 20-5374941		Applied For <input type="checkbox"/> Not Applicable																						
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																						
6. Name and Address of Current Registered Agent XIAO, SHENGYANG 1611 NW 84 AVE MIAMI, FL 33126		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 2158 NW 82 AVE City MIAMI FL Zip Code 33122																						
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: (NOTE: Registered Agent signature required when reinstating) DATE: 03/23/07																								
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																						
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">NAME</td> <td style="width: 20%;">Delete <input type="checkbox"/></td> </tr> <tr> <td>STREET ADDRESS</td> <td>XIAO, SHENGYANG</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>1611 NW 84 AVE</td> <td></td> </tr> <tr> <td></td> <td>MIAMI, FL 33126</td> <td></td> </tr> </table>		TITLE	NAME	Delete <input type="checkbox"/>	STREET ADDRESS	XIAO, SHENGYANG		CITY-ST-ZIP	1611 NW 84 AVE			MIAMI, FL 33126		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">NAME</td> <td style="width: 20%;">Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2158 NW 82 AVE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI, FL 33122</td> <td></td> </tr> </table>		TITLE	NAME	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>	STREET ADDRESS	2158 NW 82 AVE		CITY-ST-ZIP	MIAMI, FL 33122	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		SIGNATURE: DATE: 02/23/07 Daytime Phone #																						