

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000050088

FILED
Feb 18, 2008
Secretary of State

Entity Name: AMPHUOS DISTRIBUTION CORP.

Current Principal Place of Business:

1809 N JOG RD
201
WEST PALM BEACH, FL 33411 US

New Principal Place of Business:

3082 WADDELL AVE
WEST PALM BEACH, FL 33411 US

Current Mailing Address:

1809 N JOG RD
201
WEST PALM BEACH, FL 33411 US

New Mailing Address:

3082 WADDELL AVE
WEST PALM BEACH, FL 33411 US

FEI Number: 20-8923941

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NAVARRO, LUCIANE
1809 N JOG RD
201
WEST PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

NAVARRO, LUCIANE F
3082 WADDELL
WEST PALM BEACH, FL 33411 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: LUCIANE F NAVARRO

02/18/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NAVARRO, LUCIANE
Address: 1809 N JOG RD #201
City-St-Zip: WEST PALM BEACH, FL 33411 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NAVARRO, LUCIANE
Address: 3082 WADDELL AVE
City-St-Zip: WEST PALM BEACH, FL 33411 US

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: LUCIANE F NAVARRO

P

02/18/2008

Electronic Signature of Signing Officer or Director

Date