

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000064744

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: LPD GLOBAL DISTRIBUTORS, CORP

## Current Principal Place of Business:

4001 HILLCREST DRIVE  
# 610  
HOLLYWOOD, FL 33021 US

## New Principal Place of Business:

3626 NW 188 STREET  
OPA-LOCKA, FL 33056 US

## Current Mailing Address:

4001 HILLCREST DRIVE  
# 610  
HOLLYWOOD, FL 33021 US

## New Mailing Address:

PO BOX 170303  
HIALEAH, FL 33017 US

FEI Number: 26-2915790

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LOPEZ, BONIFACIO  
4001 HILLCREST DRIVE  
# 610  
HOLLYWOOD, FL 33021 US

## Name and Address of New Registered Agent:

LOPEZ, BONIFACIO  
3626 NW 188 STREET  
OPA-LOCKA, FL 33056 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: BONIFACIO LOPEZ

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LOPEZ, BONIFACIO J SR  
Address: 4001 HILLCREST DRIVE # 610  
City-St-Zip: HOLLYWOOD, FL 33021 US

Title: VP ( ) Delete  
Name: LOPEZ, BONIFACIO J JR  
Address: 4001 HILLCREST DRIVE # 610  
City-St-Zip: HOLLYWOOD, FL 33021 US

Title: D (X) Delete  
Name: DAMES, TIMOTHY G  
Address: 4001 HILLCREST DRIVE # 610  
City-St-Zip: HOLLYWOOD, FL 33021 US

Title: C (X) Delete  
Name: PILOTO, MARIANELIS  
Address: 4001 HILLCREST DRIVE # 610  
City-St-Zip: HOLLYWOOD, FL 33021 US

Title: D (X) Delete  
Name: DAMES, EMILY V  
Address: 4001 HILLCREST DRIVE # 610  
City-St-Zip: HOLLYWOOD, FL 33021 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LOPEZ, BONIFACIO  
Address: 3626 NW 188 STREET  
City-St-Zip: OPA-LOCKA, FL 33056 US

Title: VP (X) Change ( ) Addition  
Name: PILOTO, MARIANELIS  
Address: 3626 NW 188 STREET  
City-St-Zip: OPA-LOCKA, FL 33056 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: BONIFACIO LOPEZ

P

04/21/2009

Electronic Signature of Signing Officer or Director

Date