2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# P95000069333

Entity Name: A & K DISTRIBUTION, INC.

Current Principal Place of Business:

4137 W. VINE ST.
KISSIMMEE, FL 34741

New Principal Place of Business:

4139 W. VINE ST.
SUITE 117
KISSIMMEE, FL 34741

Current Mailing Address:

4137 W. VINE ST.
KISSIMMEE, FL 34741

New Mailing Address:

4139 W. VINE ST.
SUITE 117
KISSIMMEE, FL 34741

FEI Number: 59-3341898 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHADEESINGH, KAMAL
4137 W. VINE ST.
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

CHADEESINGH, KAMAL
4139 W. VINE ST.
SUITE 117
KISSIMMEE, FL 34741 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: _____ 04/30/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: CHADEESINGH, KAMAL
Address: 4137 WEST VINE STREET
City-St-Zip: KISSIMMEE, FL 34741

Title: VS ( ) Delete
Name: CHADEESINGH, ALICE
Address: 4137 WEST VINE STREET
City-St-Zip: KISSIMMEE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: CHADEESINGH, KAMAL
Address: 4139 WEST VINE STREET, SUITE 117
City-St-Zip: KISSIMMEE, FL 34741

Title: VS (X) Change ( ) Addition
Name: CHADEESINGH, ALICE
Address: 4139 WEST VINE STREET, SUITE 117
City-St-Zip: KISSIMMEE, FL 34741

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: KAMAL CHADEESINGH PD 04/30/2008
Electronic Signature of Signing Officer or Director — Date