

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000077946

FILED  
Jan 23, 2007  
Secretary of State

Entity Name: POWER 99 DISTRIBUTORS, INC.

## Current Principal Place of Business:

5407 NW 163RD ST  
MIAMI, FL 33014 US

## New Principal Place of Business:

1337 NE 163RD ST. MALL  
NORTH MIAMI, FL 33162 US

## Current Mailing Address:

P O BOX 693192  
MIAMI, FL 33269 US

## New Mailing Address:

PO BOX 693192  
MIAMI, FL 33269 US

FEI Number: 65-0784033

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHAGANI, FIRDOUS  
5407 NW 163RD ST  
MIAMI, FL 33014 US

## Name and Address of New Registered Agent:

CHAGANI, FIRDOUS  
18168 NW 89TH PLACE  
HIALEAH, FL 33018 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:

01/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: CHAGANI, FIRDOUS  
Address: 5407 NW 163RD STREET  
City-St-Zip: MIAMI, FL 33014

Title: VTD ( ) Delete  
Name: CHARANIA, SAMEER  
Address: 5407 NW 163RD STREET  
City-St-Zip: MIAMI, FL 33014

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: CHAGANI, FIRDOUS  
Address: 18168 NW 89TH PLACE  
City-St-Zip: HIALEAH, FL 33018

Title: VTD (X) Change ( ) Addition  
Name: CHARANIA, SAMEER  
Address: 16900 N. BAY RD. #1811  
City-St-Zip: SUNNY ISLES, FL 33160

I hereby certify that the information supplied with this filing does not qualify for the 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: SAMEER CHARANIA

VTD

01/23/2007

Electronic Signature of Signing Officer or Director

Date