2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008
Secretary of State

DOCUMENT# P98000088665

Entity Name: AMERICAN HOUSEHOLD PRODUCTS, INC.

Current Principal Place of Business:

4850 E 11TH AVE
HIALEAH, FL 33013 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 133690
HIALEAH, FL 33013 US

New Mailing Address:

FEI Number: 65-0870311 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MENDOZA, SANTIAGO
Address: PO BOX 133690
City-St-Zip: HIALEAH, FL 33013

Title: D ( ) Delete
Name: GABOR, IVAN
Address: P.O. BOX 133690
City-St-Zip: HIALEAH, FL 33013

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CHACON, LAURA M
Address: PO BOX 133690
City-St-Zip: HIALEAH, FL 33013 US

Title: VP (X) Change ( ) Addition
Name: MORA, OMARIS
Address: P.O. BOX 133690
City-St-Zip: HIALEAH, FL 33013 US

Title: D ( ) Change (X) Addition
Name: GABOR, IVAN
Address: P.O.BOX 133690
City-St-Zip: HIALEAH, FL 33013 US

Title: D ( ) Change (X) Addition
Name: MENDOZA, SANTIAGO
Address: P.O.BOX 133690
City-St-Zip: HIALEAH, FL 33013 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: LAURA M CHACON P 05/01/2008

Electronic Signature of Signing Officer or Director Date