

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000088665

FILED  
Apr 30, 2009  
Secretary of State

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 ( )

## 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:

SANTIAGO MENDOZA  
4850 E, 11 AVE.  
HIALEAH, FL 33013 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: SANTIAGO MENDOZA

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

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

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

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: SANTIAGO MENDOZA

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date