2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000109301

Name:

Address:

City-St-Zip:

Entity Name: A - ALMAGUER WHOLESALE DISTRIBUTORS, CORP.

FILED Mar 02, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5540 NW 84 AVE 5540 NW 84 AVE MIAMI, FL 33166 DORAL, FL 33166 US **Current Mailing Address: New Mailing Address:** 15265 SW 21ST LANE 15265 SW 21ST LANE MIAMI, FL 33185 MIAMI, FL 33185 FEI Number: 65-0968175 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALMAGUER, ALEJANDRO ALMAGUER, ALEJANDRO R MR 15265 SW 21 ST LANE 15265 SW 21 ST LANE MIAMI, FL 33185 MIAMI, FL 33185 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: AALMAGUER 03/02/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSD () Delete Title: (X) Change () Addition ALMAGUER, ALEJANDRO ALMAGUER, ALEJANDRO R MR Name: Name: 15265 SW 21 ST LANE 15265 SW 21 ST LANE Address: Address: City-St-Zip: MIAMI, FL 33185 City-St-Zip: MIAMI, FL 33185 Title: () Delete Title: () Change (X) Addition ALEJANDRO, ALMAGUER J JNR Name: Name: 15265 SW 21TH LANE Address: Address: MIAMI, FL 33185 US City-St-Zip: City-St-Zip: Title: Title: () Delete SECT () Change (X) Addition

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.

Name:

Address:

City-St-Zip:

YAQUELIN, ALMAGUER MRS

15265 SW 21TH LANE

MIAMI, FL 33185 US

SIGNATURE: AALMAGUER **PSD** 03/02/2007