


2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 09, 2007 8:00 am
Secretary of State

05-09-2007 90109 003 ***150.00

DOCUMENT # F05000006957

1. Entity Name
CDI HOLDING CORP.



Principal Place of Business
**5200 TOWN CENTER CIRCLE STE 470
 BOCA RATON FL 33486**

Mailing Address
**5200 TOWN CENTER CIRCLE STE 470
 BOCA RATON FL 33486**



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.
 City & State

3. Mailing Address
 Suite, Apt. #, etc.
 City & State

1st MOORE CR2E034 (10/06)

Zip Country Zip Country

4. FEI Number **20-3798833** Applied For
 Not Applicable

6. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP KING, THOMAS S <input type="checkbox"/> Delete 5200 TOWN CENTER CIRCLE STE 470 BOCA RATON FL 33486
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVAS KUEHN, CASE <input checked="" type="checkbox"/> Delete 5200 TOWN CENTER CIRCLE STE 470 BOCA RATON FL 33486
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS SEBASTIAO, RICHARD <input checked="" type="checkbox"/> Delete 800 COTTONTAIL LANE SOMERSET NJ 08873
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO LEBEAU, TIM <input type="checkbox"/> Delete 800 COTTONTAIL LANE SOMERSET NJ 08873
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS NEIMARK, JASON <input type="checkbox"/> Delete 5200 TOWN CENTER CIRCLE STE 470 BOCA RATON FL 33486
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS MCCONVERY, MICHAEL <input type="checkbox"/> Delete 5200 TOWN CENTER CIRCLE STE 470 BOCA RATON FL 33486

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP Archambault, Michael <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 5200 Town Center Circle, Suite 470 Boca Raton, FL 33486
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS Killion, Joel <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 5200 Town Center Circle, Suite 470 Boca Raton, FL 33486
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS-AT DeSantis, Donald <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 5200 Town Center Circle, Suite 470 Boca Raton, FL 33486
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS Barnie Levine <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 5200 Town Center Circle, Suite 470 Boca Raton, FL 33486
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Timothy R. McConvery 4/26/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #