

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**FILED**  
**Jan 28 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # K88105 (7)**

1. Corporation Name:  
**DIRECT DISPENSING, INC.**



Principal Place of Business <b>10486 N.W. 31ST TERRACE                  MIAMI FL 33172</b>	Mailing Address <b>10486 N.W. 31ST TERRACE                  MIAMI FL 33172-1215</b>
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2. Principal Place of Business <b>21 3123 A N.W. 73 STREET</b> Suite, Apt #, etc.	2a. Mailing Address <b>26 3123 A N.W. 73 STREET</b> Suite, Apt #, etc.	3. Date Incorporated or Qualified <b>05/12/1989</b>	3a. Date of Last Report <b>04/03/1996</b>
22 City & State <b>23 MIAMI, FL. S</b>	27 City & State <b>28 MIAMI, FL.</b>	4. FEI Number <b>65-0131846</b>	Applied For Not Applicable
24 Zip <b>33147</b>	25 Country <b>U.S.A.</b>	29 Zip <b>33147</b>	30 Country <b>U.S.A.</b>
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent <b>HELLMAN, MAYNARD J.                  1100 PONCE DE LEON BLVD.                  CORAL GABLES FL 33134</b>				10. Name and Address of New Registered Agent			
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)		83			
84 City		85 Zip Code		<b>FL</b>			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>PD</b>	NAME <b>ARMENGOL, MIGUEL GARCIA</b>	1.1 TITLE <b>PD</b>	1.2 NAME <b>MIGUEL GARCIA ARMENGOL</b>
STREET ADDRESS <b>10486 NW 31ST TERRACE</b>	CITY-ST-ZIP <b>MIAMI FL</b>	1.3 STREET ADDRESS <b>3123 N.W. 73 STREET</b>	1.4 CITY-ST-ZIP <b>MIAMI, FL. 33147</b>
TITLE <b>S</b>	NAME <b>LORIE, FELIPE</b>	2.1 TITLE <b>SECRETARY &amp; VICE PRES.</b>	2.2 NAME <b>FELIPE LORIE</b>
STREET ADDRESS <b>10486 N.W. 31ST TERRACE</b>	CITY-ST-ZIP <b>MIAMI FL</b>	2.3 STREET ADDRESS <b>3123 N.W. 73 ST</b>	2.4 CITY-ST-ZIP <b>MIAMI, FL. 33147</b>
TITLE <b>D</b>	NAME <b>VAN DER KWAST, HENRY</b>	3.1 TITLE	3.2 NAME
STREET ADDRESS <b>10486 N.W. 31ST TERRACE</b>	CITY-ST-ZIP <b>MIAMI FL</b>	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
TITLE	NAME	4.1 TITLE <b>VICE PRESIDENT</b>	4.2 NAME <b>MARIA COLLAZO</b>
STREET ADDRESS	CITY-ST-ZIP	4.3 STREET ADDRESS <b>3123 N.W. 73 ST.</b>	4.4 CITY-ST-ZIP <b>MIAMI, FL. 33147</b>
TITLE	NAME	5.1 TITLE	5.2 NAME
STREET ADDRESS	CITY-ST-ZIP	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
TITLE	NAME	6.1 TITLE	6.2 NAME
STREET ADDRESS	CITY-ST-ZIP	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Felipe Lorie* **FELIPE LORIE** 1-20-97 (305) 691-9906 206 EXT.

CRE034 (9/96)