

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000069971

**FILED**  
**Feb 27, 2009**  
**Secretary of State**

**Entity Name:** J & J WHOLESALE DISTRIBUTORS INC

**Current Principal Place of Business:**

2901 SW 104 CT.  
MIAMI, FL 33165

**New Principal Place of Business:**

728 NW 29 ST  
MIAMI, FL 33127

**Current Mailing Address:**

728 NW 29 ST  
MIAMI, FL 33127

**New Mailing Address:**

**FEI Number:** 20-2843054

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PAVON, ORIOL  
2901 SW 104 CT.  
MIAMI, FL 33165 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PD ( ) Delete  
**Name:** PAVON, ORIOL  
**Address:** 2901 SW 104 CT.  
**City-St-Zip:** MIAMI, FL 33165

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**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:** ORIOL PAVON

PD

02/27/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date