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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

#### Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

# DOCUMENT # P96000050791 (8)

### HUSKY PRODUCTS DISTRIBUTORS INC.

Principal Place of Business Mailing Address

612 N. ORANGE ST.

SUITE A-2

JUPITER FL 33458

26. Mailing Address

Mailing Address

612 N. ORANGE ST.

SUITE A-2

JUPITER FL 33458-5020

# FILED Apr 17 1997 8:00am Secretary of State



3. Date Incorporated or Qualified 3a. Date of Last Report

							06/14/1996	]		
2. Principal	Place of Business	2a. Mailing A	Address				4. FEI Number		Applied For	
21		26					65-0677974		Not Applicable	
Suite, Apt	t.#, etc.	Suite, Ap	Suite, Apt. #, etc.				5. Certificate of Status Desired	☐ \$8.7 <b>!</b>	5 Additional	
22		27					6. Certificate of Status Desired	Fee Fee	Required	
City & Sta	ile	City & St	ate			ĺ	6. Election Campaign Financing	\$5.0	May Be	
23		28					Trust Fund Contribution		d to Fees	
Zip	Country	Zip	L	Country		ì	8. This corporation has liability for it	tangible tax unde	r s. 199.032,	
24	25	29	30				Florida Statutes	Yes 🗌 No		
	9. Name and Address of Curre	nt Registered Age	ent				10. Name and Address of New Reg	istered Agent		
RO	TH, RICHARD			81	Name					
812 N. ORANGE ST.					82 Street Address (P.O. Box Number is Not Acceptable)					
SUITE A-2					Street Address (F.O. Box Number is Not Acceptable)					
JUPITER FL 33458					83					
-	1121112									
•				84	City			FL 85 Z	p Code	
11. Pursuan	Lto the provisions of Sections 607 050	12 and 607 1508 f	Florida Statutes H	be above	named	Loornor	ration submits this statement for the su	FL	lto coolstoned	
• office or	registered and t, or both, in the State	of Florida. Such c	change was author	orized by	the cor	poration	n's board of directors. I hereby accept	the appointment	as registered	
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 agost, 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 familia with, and accept the objugated of 507.0505, Florida Statutes.										
SIGNATURE	Kanan y.	x ~	····					ラペムコ	7/	
12.	**	nn and title if applicable ID DIRECTORS			nt signature	e required	when reinstating)	DATE		
11116	D OFFICIAS AN			13.		7	ADDITIONS/CHANGES TO OFFICE			
	ROTH, RICHARD	L.		1.1 TITLE				☐ Chang	e L. Addition	
NAME		•	l l	1.2 NAME		]				
STREET ADDRESS		٤		1.3 STREET	ADDRESS	]				
CITY ST-ZIP	JUPITER FL 33458			14 CITY-S	T-ZIP	<u> </u>				
711LE	D	Ĺ	_ DELETE	2.1 TITLE		1		☐ Chang	e 🔲 Addition	
NAM?	SMITH, PETER			2 2 NAME		1				
STREET ADDRESS		2		2.3 STREET	ADDRESS	l			i	
CITY-ST-ZIP	JUPITER FL 33458			2. 4 CITY - S	T - ZIP	1				
1111.6		L	DELETE	3.1 TITLE				☐ Chang	e Addition	
NAME			•	3.2 NAME		]				
STREET ADORESS	. }			3.3 STREET	ADDRESS					
CITY-ST-ZIF				3.4. CITY - S					1	
TITLE				4 1 TITLE		<del>1</del>		Chang	e Addition	
NAME		<u>-</u> -	· 1	4. 2 NAME		[				
STREET ADDRESS				4.3 STREET	Annæree Annæree					
CHY-ST-ZIP									,	
TIFF			D.D. rote	4.4 CITY-ST	1 - ZIP	<del> </del> -		Chang	e Addition	
NAME		L		5.1 TILLE		1		L_ Grang	o Li Nuomen	
			<b>i</b>		l nontro					
STREET ADDRESS			•	5.3 STREET		{				
C:TY+ST+ZIP				5.4 CITY - ST	1 - <u>7</u> 1P	<b>├</b>				
Mrt		L.		6.1 TITLE				Change	e 🔲 Addition	
NAME	1		J 1	62 NAME						
STREET ADDRESS	1			6.3 STREET	ADDRESS	1				
CITY-S1-7IP				6 4 CITY - S1	-ZIP				ļ	
14. I do here	by certify that the information supplie	d with this filing do	oes not qualify for	the exer	mption s	stated in	Section 119.07(3)(i), Florida Statutes	. I further certify th	at the	
Harmonn	on malcated on this annual report of t	supplemental annu	Jai report is true 8	ino accu	rate and	that m	y signature shall have the same legal	errect as it made i	under oath; that	

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 it made under oath; the Lam 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 12 in changed, or on an attachment with an address.

SIGNATURE:

CHARLES AND TYPED OF PRINTED MAKE OF SIGNING OFFICER OF DIRECTOR

4-8-97 (561) 748-9616

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