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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000075885 (8)

CONTINENTAL VENDORS, CORP.

Principal Place of Business

officer or director of the corporation Block 12 or Block 13 if changed, o

Mailing Address

FILED Apr 17 1998 8:00am Secretary of State



8920 S.W. 68TH CT., STE. J - 7 8920 S.W. 68TH CT., STE. J - 7 MIAMI FL 33156 MIAMI FL 33156 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/02/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 6507780-66 21 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BUTTERS, RICHARD P 8920 S.W. 68TH CT., STE. J - 7 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33156** 83 City Zip Code 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** Signature, typed or preded con it of registered agent and title d applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DPT Addition TITLE DELETE 1.1 TITLE ☐ Change **BUTTERS, RICHARD P** NAME 1.2 NAME 8920 S.W. 68TH CT., STE. J - 7 STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33156** CITY-ST-ZIP 14 City-St-ZiP DELETE Change Addition TITLE 21 TITLE TURKOVICH, FERNANDO NAME 22 NAME 8920 S.W. 68TH CT., STE. J - 7 STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33156** CITY-ST-ZIP 2 4 CITY - ST - ZIP Change DELETE Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - ZIP DELETE ___ Change ☐ Addition 4.1 THILE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition ☐ Change TITLE 6.1 TITUE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 14. I hereby certify that the informatio indicated on this annual report or 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 professional 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 or type receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

4/2/67