2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2005
Secretary of State

DOCUMENT# P99000035030

Entity Name: BEE DISTRIBUTION CORP.

Current Principal Place of Business:

17056 HUNTINGTON PARKWAY
BOCA RATON, FL 33496

New Principal Place of Business:

Current Mailing Address:

17056 HUNTINGTON PARKWAY
BOCA RATON, FL 33496

New Mailing Address:

FEI Number: 65-0911033 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHWARTZ, ELI H
17056 HUNTINGTON PARK WAY
BOCA RATON, FL 33496 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: PTD ( ) Delete
Name: SCHWARTZ, ELI
Address: 17056 HUNTINGTON PARKWAY
City-St-Zip: BOCA RATON, FL 33496

Title: VD ( ) Delete
Name: ZIEDMAN, WILLIAM DR.
Address: 17 HIGH STREET
City-St-Zip: MIDDLEBURY, VT 05753

Title: SD ( ) Delete
Name: POLEN, EDWARD
Address: 6121 HOLLOWS LANE
City-St-Zip: DELRAY BEACH, FL 33484

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change ( ) Addition
Name: POLEN, SHIRLEY
Address: 6121 HOLLOWS LANE
City-St-Zip: DELRAY BEACH, FL 33484

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ELI SCHWARTZ PTD 04/21/2005

Electronic Signature of Signing Officer or Director Date