FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED PROFIT** FLORIDA DEPARTMENT OF STATE Jan 15 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # J40156 (8) ARCADIA DISTRIBUTION CORPORATION Principal Place of Business Mailing Address 2600 S.W. 3RD AVENUE, STE.801 2600 SW 3RD AVE MIAMI FL 33129 SHITE 801 DO NOT WRITE IN THIS SPACE MIAMI FL 33129 3. Date Incorporated or Qualified 10/24/1986 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-2734466 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zio Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent PARLADE, ALBERTO J., ESQUIRE 3850 S.W. 87TH AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 207 83 **MIAMI FL 33165** 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 printed name of registered agent and title it applicable (NOTE. Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ DELETE TITLE 1.1 TITLE Change ROSENFELD, MIGUEL NAME 1.2 NAME 5945 SW 134 STREET 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE ROSENFELD, MIGUEL NAME 2.2 NAME 5945 S.W. 134 STREET 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY - ST - ZIP 2. 4 CITY - ST-ZIP DELETE Addition TITLE 3.1 TITLE Change 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADORESS CITY-ST-ZIP 3.4. CITY - ST - 7/P Addition DELETE Change TITLE 4,1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADORESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP

SIGNATURE:

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DELETE

14. I hereby certify that the information supplied with this filling 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 true time 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 attachmer true appears in the receiver of the corporation of the receiver of the corporation of the receiver of the receiver of the corporation of the receiver of the Emiguel Rosenfold

6 3 STREET ADDRESS 6.4 CITY-ST-ZIP

Change

Addition

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