

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000040158

Entity Name: DRIVE DISTRIBUTORS, INTL., INC.

Current Principal Place of Business:

5059 SOUTEL DR
JACKSONVILLE, FL 32208-1863

Current Mailing Address:

5059 SOUTEL DR
JACKSONVILLE, FL 32208-1863

FEI Number: 27-2558577

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HAMZA, AMOR
5059 SOUTEL DR
JACKSONVILLE, FL 32208-1863 US

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

Officer/Director Detail :

Title PRES
Name HAMZA, AMOR
Address 1523 CHAFFEE RD #7
City-State-Zip: JACKSONVILLE FL 32221

I hereby 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 all other like empowered.

SIGNATURE: AMOR HAMZA

PRES

04/23/2014

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date