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: ISABEL CEREZO

Electronic Signature of Signing Officer/Director Detail

Current Mailing Address:

Current Principal Place of Business:

DOCUMENT# P11000091978

P O BOX 10815 TAMPA, FL 33679 US

3402 W CASS STREET TAMPA, FL 33609

FEI Number: 45-3640025

Name and Address of Current Registered Agent:

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: G. A. C. WHOLESALE DISTRIBUTION INC

TESTA, PHILIP J 4726 B N LOIS AVE TAMPA, FL 33614 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	: PHILIP J TESTA			01/28/2013
		Electronic Signature of Registered Agent			Date
Officer/Director Detail :					
	Title	Ρ	Title	VP	
	Name	CEREZO, ISABEL J	Name	CEREZO, GABRIEL JR	
	Address	3402 W CASS ST	Address	2135 ASHLEY LAKES DR	
	City-State-Zip:	TAMPA FL 33609	City-State-Zip:	ODESSA FL 33556	
	Title	т	Title	S	
	Name	CEREZO, ADRIAN	Name	CEREZO, ISELA A	
	Address	3402 W CASS ST	Address	3402 W CASS STREET	
	City-State-Zip:	TAMPA FL 33609	City-State-Zip:	TAMPA FL 33609	

Certificate of Status Desired: Yes

FILED Jan 28, 2013 Secretary of State CC0318577770

01/28/2013 Date

PRESIDENT