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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

**FILED** May 15 1998 8:00am Secretary of State

1. Corporatio	MEIN # 139524 Ny distributors, INC.	(3)							
Principal Plac	e of Business	Mailing Address			1 <b>350 31 11500</b> 54160 10603 <b>0</b> 6110 13061	0 4  0 3   0  <del>3</del>	(I BIBLI BIBLI BIBL		
2000 E JOH AVENUE		2900 E 7TH AVENUE							
TANDA FL 33	<b>605</b> .	TAMPA PC 33605			DO NOT WRI	TE IN THIS	SPACE		
		,		ŀ	3. Date Incorporated or Qualified		-		1
					08/23/1940				
	lace of Business	2a. Mailing Address	1/ 6	2	4. FEI Number		Ar	oplied For	
21 170	4W. KENNEDY BLYI	) 25 1704W.	KENNEDY C	77/0	59-0145031			ot Applicable	-
Suite, Apt.	W, etc.	Suite, Apt. #, etc.	,		5. Certificate of Status Desired		<b>\$8.75</b> / Fee Re	Additional equired	
City & Stat		City & State  28 TAMPA FI			Election Campaign Financing     Trust Fund Contribution		\$5.00	May Be to Fees	
Zip	Country	7ip	Country		8. This corporation owes or has	naid the ci			l
24 336			Country S. A	1	Personal Property Tax due Ju	ne 30.	☐ Yes ☐	] No	
P 4	JAMO ANTHONIV C	Liedistelen wäsin	81 Name	/1	10. Name and Address of New I		- Ayant	<u> </u>	
	Liano,anthony s 10 <b>e</b> seventri ave	OF THE STATE OF TH		AV	THONY S. I	TAL	IANO .	<u>UK /</u>	ļ
	MPA FL-33605	WK CE ST	82 Street	4aares	s (P.O. Box Number is Not Accept	able)	_		l
ITALIANO, ANTHONY S 2900 E SEVENTH AVE TAMPA FL 33605			83 / ~	701	4 11) VEVILLE	- 1 V	BLVZ	<b>&gt;</b> .	1
	(	JW.	84 City		/ WI / SOVING	· //		Code	ł
44 6				11	MPA	F <u>I</u>	<u> </u>	606	-
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State i in familiar with, and accept this bliga	r and 607.1508, Florida Statutes of Florida, Such change was au	s, the above-named ithorized by the corp	corpor	ation submits this statement for thi n's board <mark>of d</mark> irectors. I hereby acc	ept the ap	of changing it opointment as	registered registered	
	in tamplar with, and accord the libling	tions of, Section 607.0505, Flori IANTHONY	ida Statules.	101	IN SO SECTU	,	dul	98	l
SIGNATURE		and tiled applicable (NOTE)	Registered Agent signaturu	required	10, SR., SECTY	DATE	T/16/	70	ءا
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OF	ICERS AN			٤
TITLE	PD CALVATORS A	L. DELETE	1.1 TITLE				<b>Change</b>	Addition	1
NAME CIRCL ADDRESS	ITALIANO, SALVATORE A 4912 BAY WAY PL.	100/165/14	12 NAME	,	704 W. KENNEN	BLV	D.		3
STREET ADDRESS CITY-ST-ZIP	TAMPA, FL 00000	WILL ONL	1.3 STREET ADDRESS	TI	MPA FI 336	06			ű
TITLE	<b>SD</b>	DELETE	2.1 TITLE		704 W. KENNEDY MPA, FL 336 104 W. KENNED	00	Change	Addition	2
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indicated	certify that the information supplied will on this annual report or supplemental	n this ning coes <b>not quality for</b> annual report is true <b>and</b> accur	the exemption state rate and that my sig	u in S€ nature	shall have the same legal effect a	. i further d s if made u	æitiry inat the inder oath; the	at I am an	İ

indicated on risis annual report or supplicimental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a 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 in Block 12 or Block 13 if changed, or or an attachment with an address.

GNATURE:

(813) 254-388'