FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

FLORIDA DEPARTMENT OF STATE **PROFIT** CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 (6)DOCUMENT # RELIABLE DISTRIBUTING COMPANY Maling Address Principal Place of Business 11510 SW 33 TERR 11510 SW 33 TERR MIAMI FL 33165 MIAMI FL 33165 3a. Date of Last Report US 3. Date Incorporated or Qualified 115 06/19/1995 08/27/1953 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 59-0703802 26 21 \$8.75 Additional 5. Certificate of Status Desired Saite, Apt. #, etc. Suite, Apt. #, etc. Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 This corporation has liability of intangible tax under s. 199.032. Country Zφ Country Ζıρ Yes No Florida Statutes 30 25 29 10. Name and Address of New Registered Agent 24 9. Name and Address of Current Registered Agent 81 Street Address (P.O. Box Number is Not Acceptable) 82 PUJALS, MERCEDES 11510 SW 33 TERR 83 MIAMI FL 33165 Zip Code 85 City FL 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: Sino) change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE drifts. Bug mired Aport supation regimed when receitaing Separate typed represent the chequie of a policy of a control faces ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 Change DELETE 1 1 1111 8 ST TITLE 1.2 NAME PUJALS, MERCEDES NAME 1.3 STREET ADDRESS 11510 SW 33 TERR STREET ADDRESS 1.4 CITY - ST - ZIP MIAMI FL CITY - ST - ZIP Change DELETE 2.1 liftE P TITLE 2.2 NAME PUJALS, GERARDO NAME 2.3 STREET ADDRESS 11510 S W 33 TERR STREET ADDRESS 24 CITY - ST - ZIP MIAMI, FL 00000 CITY-ST-ZIP DELFTE 3 1 1016 TITLE 3.2 NAME 3.3 STREET AUDRESS STREET ADDRESS 3.4 City S1-ZiP

STREET ADDRESS 14. I do hereby certry that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 trusted 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 attachnym with an address. 6.4 CHY+ST-ZIP

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