

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 212679

FILED
Apr 02, 2005
Secretary of State

Entity Name: C.G. SUAREZ DISTRIBUTING COMPANY, INC.

Current Principal Place of Business:

10120 ELIZABETH PLACE
PO BOX 1134
TAMPA, FL 33601

New Principal Place of Business:

10120 ELIZABETH PLACE
TAMPA, FL 33601

Current Mailing Address:

10120 ELIZABETH PLACE
PO BOX 1134
TAMPA, FL 33601

New Mailing Address:

P O BOX 152
HOMOSASSA, FL 34487

FEI Number: 59-0844182

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEAN, C.W. JR
10120 ELIZABETH PLACE
TAMPA, FL 33619 US

Name and Address of New Registered Agent:

DEAN, C.W. JR
P O BOX 152
HOMOSASSA, FL 34487 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:

04/02/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: DEAN, C.W. SR
Address: 5 BAHAMA CIRCLE
City-St-Zip: TAMPA, FL 33606

Title: PVPD () Delete
Name: DEAN, C W JR.,
Address: P O BOX 1134
City-St-Zip: TAMPA, FL 33601

Title: STD () Delete
Name: DEAN, C.W. III
Address: 2225 SHADE HILL CT.
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PVPD (X) Change () Addition
Name: DEAN, C W JR.,
Address: P O BOX 152
City-St-Zip: HOMOSASSA, FL 34487

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DEAN, C W JR.

PVPD

04/02/2005

Electronic Signature of Signing Officer or Director

Date