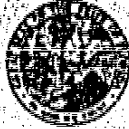


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**CORPORATION
ANNUAL REPORT
1995****FLORIDA DEPARTMENT OF STATE
Candra B. Northam
Secretary of State
DIVISION OF CORPORATIONS****DOCUMENT # 516725****(9)**

1. Corporation Name

CANEY DISTRIBUTING CO., INC.

Principal Place of Business

**743 N.W. 23RD ST.
MIAMI FL 33127-4242**

Mailing Address

**743 N.W. 23RD ST.
MIAMI FL 33127-4242****APPROVED
AND
FILED****95 MAR 16 AM 10: 09****SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/15/1976

3a. Date of Last Report

03/08/1994

4. FEI Number

59-2017858

Applied For

Not Applicable

5. Certificate of Status Desired

☐**\$8.75 Additional
Fee Required**6. Election Campaign Financing
Trust Fund Contribution☐**\$5.00 May Be
Added to Fees**8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes☒ Yes☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

24**25****29****30**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SANCHEZ, VIRGILIO
1178 SW 22 TERR
MIAMI FL**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

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. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	SANCHEZ, VIRGILIO
STREET ADDRESS	1178 SW 22 TERR
CITY-ST-ZIP	MIAMI FL
TITLE	T
NAME	SANCHEZ, AMELIA R.
STREET ADDRESS	1178 S.W. 22 TERR.
CITY-ST-ZIP	MIAMI FL
TITLE	T
NAME	SANCHEZ, VIRGILIO JR.
STREET ADDRESS	1621 COLLINS AVE.
CITY-ST-ZIP	MIAMI BCH. FL
TITLE	VP
NAME	SANCHEZ, TEODORO J.
STREET ADDRESS	2735 S.W. 64TH AVE.
CITY-ST-ZIP	MIAMI FL
TITLE	VP
NAME	SANCHEZ, JUAN R.
STREET ADDRESS	1621 COLLINS AVE.
CITY-ST-ZIP	MIAMI BCH. FL
TITLE	V
NAME	ODUM, ERIC W
STREET ADDRESS	1621 COLLINS AVE.
CITY-ST-ZIP	MIAMI BCH. FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	DELETE
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	DELETE
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☒ Change ☐ Addition
5.2 NAME	DELETE
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing 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 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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/95

Date

(305)635-1204

(Typed Name)