

FILED
Mar 09, 1999 8:00 am
Secretary of State

03-09-1999 90009 027 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS																																																																																	
DOCUMENT # 557139 1. Corporation Name ONE SOURCE SUPPLY, INC.																																																																																			
Principal Place of Business 3901 NORTH 29TH AVENUE HOLLYWOOD FL 33020		Mailing Address 303 HARPER DR MOORESTOWN NJ 08057 US																																																																																	
DO NOT WRITE IN THIS SPACE																																																																																			
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		3. Date Incorporated or Qualified 01/11/1978 4. FEI Number 59-1786182 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees 7. Trust Fund Contribution ☐ 8. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☒ No																																																																																	
9. Name and Address of Current Registered Agent MARBIN, EVAN R ESQUIRE 48 EAST FLAGLER ST., PENTHOUSE 104 MIAMI FL 33131		10. Name and Address of New Registered Agent 81 Name Fred B. Gross c/o Wilmar 82 Street Address (P.O. Box Number is Not Acceptable) 3901 North 29th Avenue 83 84 City Hollywood FL 85 Zip Code 33020																																																																																	
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 <i>[Signature]</i> DATE 4/21/99																																																																																			
(NOTE: Registered Agent signature required when re-registering)																																																																																			
12. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;"> TITLE P </td> <td style="width:50%; text-align: right;"> ☐ DELETE </td> </tr> <tr> <td>NAME GREEN, WILLIAM</td> <td></td> </tr> <tr> <td>STREET ADDRESS 303 HARPER DR</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP MOORESTOWN NJ</td> <td></td> </tr> <tr> <td>TITLE T</td> <td style="text-align: right;"> ☐ DELETE </td> </tr> <tr> <td>NAME TOOMEY, MICHAEL</td> <td></td> </tr> <tr> <td>STREET ADDRESS 303 HARPER DR</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP MOORESTOWN NJ</td> <td></td> </tr> <tr> <td>TITLE </td> <td style="text-align: right;"> ☐ DELETE </td> </tr> <tr> <td>NAME </td> <td></td> </tr> <tr> <td>STREET ADDRESS </td> <td></td> </tr> <tr> <td>CITY-ST-ZIP </td> <td></td> </tr> <tr> <td>TITLE </td> <td style="text-align: right;"> ☐ DELETE </td> </tr> <tr> <td>NAME </td> <td></td> </tr> <tr> <td>STREET ADDRESS </td> <td></td> </tr> <tr> <td>CITY-ST-ZIP </td> <td></td> </tr> </table>		TITLE P	☐ DELETE	NAME GREEN, WILLIAM		STREET ADDRESS 303 HARPER DR		CITY-ST-ZIP MOORESTOWN NJ		TITLE T	☐ DELETE	NAME TOOMEY, MICHAEL		STREET ADDRESS 303 HARPER DR		CITY-ST-ZIP MOORESTOWN NJ		TITLE 	☐ DELETE	NAME 		STREET ADDRESS 		CITY-ST-ZIP 		TITLE 	☐ DELETE	NAME 		STREET ADDRESS 		CITY-ST-ZIP 		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;"> 1.1 TITLE V/S </td> <td style="width:50%; text-align: right;"> ☐ Change ☒ Addition </td> </tr> <tr> <td>1.2 NAME Fred B. Gross</td> <td></td> </tr> <tr> <td>1.3 STREET ADDRESS 303 Harper Drive</td> <td></td> </tr> <tr> <td>1.4 CITY-ST-ZIP MOORESTOWN NJ 08057</td> <td></td> </tr> <tr> <td>2.1 TITLE D</td> <td style="text-align: right;"> ☐ Change ☒ Addition </td> </tr> <tr> <td>2.2 NAME Donald Wilson</td> <td></td> </tr> <tr> <td>2.3 STREET ADDRESS 20422 Matterhorn Drive</td> <td></td> </tr> <tr> <td>2.4 CITY-ST-ZIP Lawrenceburg, IN 47025</td> <td></td> </tr> <tr> <td>3.1 TITLE D</td> <td style="text-align: right;"> ☐ Change ☒ Addition </td> </tr> <tr> <td>3.2 NAME Martin Hanaka</td> <td></td> </tr> <tr> <td>3.3 STREET ADDRESS Sports Authority</td> <td></td> </tr> <tr> <td>3.4 CITY-ST-ZIP 3383 N. State Road 7</td> <td></td> </tr> <tr> <td>4.1 TITLE D</td> <td style="text-align: right;"> ☐ Change ☒ Addition </td> </tr> <tr> <td>4.2 NAME Ernest K. Jacquet</td> <td></td> </tr> <tr> <td>4.3 STREET ADDRESS Parthenon Capital</td> <td></td> </tr> <tr> <td>4.4 CITY-ST-ZIP 200 State Street</td> <td></td> </tr> <tr> <td>5.1 TITLE </td> <td style="text-align: right;"> ☐ Change ☐ Addition </td> </tr> <tr> <td>5.2 NAME </td> <td></td> </tr> <tr> <td>5.3 STREET ADDRESS </td> <td></td> </tr> <tr> <td>5.4 CITY-ST-ZIP </td> <td></td> </tr> <tr> <td>6.1 TITLE </td> <td style="text-align: right;"> ☐ Change ☐ Addition </td> </tr> <tr> <td>6.2 NAME </td> <td></td> </tr> <tr> <td>6.3 STREET ADDRESS </td> <td></td> </tr> <tr> <td>6.4 CITY-ST-ZIP </td> <td></td> </tr> </table>		1.1 TITLE V/S	☐ Change ☒ Addition	1.2 NAME Fred B. Gross		1.3 STREET ADDRESS 303 Harper Drive		1.4 CITY-ST-ZIP MOORESTOWN NJ 08057		2.1 TITLE D	☐ Change ☒ Addition	2.2 NAME Donald Wilson		2.3 STREET ADDRESS 20422 Matterhorn Drive		2.4 CITY-ST-ZIP Lawrenceburg, IN 47025		3.1 TITLE D	☐ Change ☒ Addition	3.2 NAME Martin Hanaka		3.3 STREET ADDRESS Sports Authority		3.4 CITY-ST-ZIP 3383 N. State Road 7		4.1 TITLE D	☐ Change ☒ Addition	4.2 NAME Ernest K. Jacquet		4.3 STREET ADDRESS Parthenon Capital		4.4 CITY-ST-ZIP 200 State Street		5.1 TITLE 	☐ Change ☐ Addition	5.2 NAME 		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 	
TITLE P	☐ DELETE																																																																																		
NAME GREEN, WILLIAM																																																																																			
STREET ADDRESS 303 HARPER DR																																																																																			
CITY-ST-ZIP MOORESTOWN NJ																																																																																			
TITLE T	☐ DELETE																																																																																		
NAME TOOMEY, MICHAEL																																																																																			
STREET ADDRESS 303 HARPER DR																																																																																			
CITY-ST-ZIP MOORESTOWN NJ																																																																																			
TITLE 	☐ DELETE																																																																																		
NAME 																																																																																			
STREET ADDRESS 																																																																																			
CITY-ST-ZIP 																																																																																			
TITLE 	☐ DELETE																																																																																		
NAME 																																																																																			
STREET ADDRESS 																																																																																			
CITY-ST-ZIP 																																																																																			
1.1 TITLE V/S	☐ Change ☒ Addition																																																																																		
1.2 NAME Fred B. Gross																																																																																			
1.3 STREET ADDRESS 303 Harper Drive																																																																																			
1.4 CITY-ST-ZIP MOORESTOWN NJ 08057																																																																																			
2.1 TITLE D	☐ Change ☒ Addition																																																																																		
2.2 NAME Donald Wilson																																																																																			
2.3 STREET ADDRESS 20422 Matterhorn Drive																																																																																			
2.4 CITY-ST-ZIP Lawrenceburg, IN 47025																																																																																			
3.1 TITLE D	☐ Change ☒ Addition																																																																																		
3.2 NAME Martin Hanaka																																																																																			
3.3 STREET ADDRESS Sports Authority																																																																																			
3.4 CITY-ST-ZIP 3383 N. State Road 7																																																																																			
4.1 TITLE D	☐ Change ☒ Addition																																																																																		
4.2 NAME Ernest K. Jacquet																																																																																			
4.3 STREET ADDRESS Parthenon Capital																																																																																			
4.4 CITY-ST-ZIP 200 State Street																																																																																			
5.1 TITLE 	☐ Change ☐ Addition																																																																																		
5.2 NAME 																																																																																			
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 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, upon an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

RECEIVED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/24/99

(609) 533-3159
 533-3145

CR20034 (11/98)