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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Sep 02, 1999 8:00 am Secretary of State

09-02-1999 90008 034 ***550.00

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DOCUMENT # 634833

1. Corporation Name

P & F DISTRIBUTORS, INC.

						AN AND DELEN	
Principal Place	of Business	Mailing Address			T (ABUIG BILAN WING STORE LEADS WIN ST	Bri dibit diaci elei	it atali minit iant
4366 US #1 4366 US #1							
VERO BEACH FL 32967 VERO BEACH FL 32967					DO NOT WRITE IN THIS SPACE		
					 Date Incorporated or Qualifed 09/04/1979 		
2 Dringing Di	nce of Ausinese	2a. Mailing Address			4. FEI Number		Applied For
					59-1951223	1	Not Applicable
25 26						\$8.75	Additional
22 27					5. Certificate of Status Desired	Fee	Required
City & State City & State					6. Election Campaign Financing	\$5.0	O May Be
23 28					Trust Fund Contribution		d to Fees
Zip			Countr		8. This corporation owes the current year Intangible		
24	25	29	10		Personal Property Tax.	Yes_	□No
) 	9. Name and Address of Current Registered Agent				10. Name and Address of New Registe	red Agent	
			81	Name			}
BANDURA, WALLY R			21	82 Street Address (P.O. Box Number is Not Acceptable)			
4366 US #1			102	Ottos: Addisos (F.O. Dox Halling) is 1101 (Coophadis)			
) VERC	D BEACH FL 32967		83	3]
}				1		05 7i	p Code
)			84	City		FL 85 Zi	p Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607,1508, Florida Statutes	s, the abov	ve-named cor	rporation submits this statement for the purpos tion's board of directors. I hereby accept the a	e of changing	its registered
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was aut	horized by	y the corpora	tion's board of directors. I hereby accept the a	ppointment as	registered
) ,	m tamiliar with, and accept the obliga	RIORS OF SECTION SOLVES OF SHORE	Ja Glaiule	4.			ļ
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: F	Registered Age	ent signature requi	ired when reinstating) DATI		
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	D	☐ DELETE	1.1 TITLE			Chang	ge 🗀 Addition
NAME	BANDURA, JUDITH C		1.2 NAME				ĺ
STREET ADDRESS	1081 27TH AVENUE 1.381		1.3 STRES	ET ADDRESS			
City-St-Zip	VERO BEACH FL 32960		1.4 CITY-	ST-ZIP			
TITLE	P	☐ DELETE	2.1 TITLE			Chang	e 🗀 Addition
NAME	BANDURA, WALLY R		2.2 NAME	·			
STREET ADDRESS	1081 27TH AVENUE		2.3 STRE	ET ADDRESS			
CITY-ST-ZIP	VERO BEACH FL-32960	-	2.4 CITY-	-ST-ZIP			
TITLE	S	☐ DELETE	3.1 TITLE			Chang	ge 🔲 Addition
NAME	BANDURA, JUDITH C		3.2 NAME				(
STREET ADDRESS	1081 27TH AVENUE		3.3 STRE	ET ADORESS			ĺ
CITY-ST-ZIP	VERO BEACH FL 32960		3.4. CiTY-	ST-ZIP			
TITLE	V	☐ DELETE	4.1 TITLE			Chang	ge 🔲 Addition
NAME	DANCISIN, MICHAEL J		4. 2 NAME	Ε			İ
STREET ADDRESS	7301 PLUMOSA LANE		4.3 STRE	ET ADDRESS			İ
CITY-ST-ZIP	FT PIERCE FL 32951		4.4 CITY-	ST-ZIP			
TITLE	<u></u>	DELETE	5.1 TITLE			Chang	ge Addition
NAME			5.2 NAME	:			Ì
STREET ADDRESS			5.3 STRE	ET ADDRESS			ł
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			}
TITLE	<u> </u>	☐ DELETE	6.1 TITLE			☐ Chang	ge Addition
NAME			6,2 NAME	:			{
STREET ADDRESS			6.3 STRE	ET ADDRESS			1
CITY-ST-ZIP			6.4 CITY-	ST-ZIP			
ODITION DE	1 · · ·						

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, or on an attachment with an address, with all other like empowered.

SIGNATURE:

HIM LOURE RMichaele Dancesin

5/1/99 561-569-1366

KZEU34 (11/98)