2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 637075 1. Entity Name PCO WHOLESALERS, INC.				R)	FILED Apr 19, 2001 8:00 am Secretary of State 04-19-2001 90046 045 ***150.00	
Principal Place of Business 4128 MERCY INDUSTRIAL CT. ORLANDO FL 32808		Mailing Address 4128 MERCY INDUSTRIAL CT. ORLANDO FL 32808			C0048306	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address P.O. Box 680719 Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE	
City & State		City & State ORLANDO, FL.			4. FEI Number 59-1933332 Applied For Not Applicable	
Zip	Country	Zip 32868-0719-	Country		5. Certificate of Status Desired Status Desired Statu	
CRAMER, CHARLES 1422 EDGEWATER DR. ORLANDO FL 32804			Name Street / City	Name Street Address (P.O. Box Number is Not Acceptable)		
SIGNATURE	ture, typed or printed name of registered agent and on is eligible to satisfy its Intangible rement and elects to do so.	title if applicable, (NOTE: I	Registered Agent signa FEE IS \$150 1 Fee will be \$	ture required who .00 550.00	agent, or both, in the State of Florida en reinstating) DATE 10. Election Campaign Financing \$5,00 May Be Trust Fund Contribution. Added to Fees	
STREET ADDRESS 802	OFFICERS AND DII M NG, RICHARD A 2 W. HARBOUR COURT COEE FL 34761		12. TITLE NAME STREET ADDRESS CITY-ST-ZIP		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TTLE PD VAME PE STREET ADDRESS 73		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD. PECK 922 OBLO	KENNETH B 1/2 W. PRINCETON ST. NDO, FL. 32804	
ITLE IAME ITREET ADDRESS ITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition	
ITLE AME TREET ADDRESS ITY-ST-21P		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition	
TLE Ame Treet Address Ity-st-zip		Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		Change Addition	
TLE AME IREET ADDRESS TY-ST-ZIP		Delete	TITLE NAME Street address City-st-zip		Change Addition	
of the corporat	is report or supplemental report is tru- lon or the receiver or trustee empower n an attachment with an address, with	e and accurate and that my ared to precute this report as	signature shall f s required by Ch	have the sam apter 607, Fl	on 119.07(3)(i), Florida Statutes. I further certify that the information te legal effect as if made under oath; that I am an officer or director or director or director brida Statutes; and that my name appears in Block 11 or Block 12 if	