

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 673053

FILED
Mar 25, 2004
Secretary of State

Entity Name: REAL DISTRIBUTING CORP.

Current Principal Place of Business:

8029 NW 60TH ST
PO BOX 520631
MIAMI, FL 331666897

New Principal Place of Business:

Current Mailing Address:

8029 NW 60TH ST
PO BOX 520631
MIAMI, FL 331666897

New Mailing Address:

FEI Number: 59-2029566

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABRANTE, ALBERTO R.
8025 N.W. 60TH ST.
MIAMI, FL 331666897 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ABRANTE, ALBERTO,
Address: 9360 SW 66 ST
City-St-Zip: MIAMI, FL

Title: V () Delete
Name: ABRANTE, JOSE A,
Address: 10383 SW 12TH STREET
City-St-Zip: MIAMI, FL

Title: S () Delete
Name: ABRANTE, JOSE M.,
Address: 9682 FOUNTAINBLEAU BLVD
City-St-Zip: MIAMI, FL

Title: T () Delete
Name: DE VARONA, MARTA,
Address: 15433 S W 43 LN
City-St-Zip: MIAMI, FL

Title: V () Delete
Name: ABRANTE, ALBERTO R,
Address: 4639 N W 97 CT
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ABRANTE, ALBERTO,
Address: 9360 SW 66 ST
City-St-Zip: MIAMI, FL 33173

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

Title: S (X) Change () Addition
Name: ABRANTE, JOSE M.,
Address: 9360 S.W. 66 ST.
City-St-Zip: MIAMI, FL 33173

Title: T (X) Change () Addition
Name: DE VARONA, MARTA,
Address: 7349 S.W. 120 CT.
City-St-Zip: MIAMI, FL 33173

Title: V (X) Change () Addition
Name: ABRANTE, ALBERTO R,
Address: 4639 N W 97 CT
City-St-Zip: MIAMI, FL 33166

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: MARTA DE VARONA

TREA

03/25/2004

Electronic Signature of Signing Officer or Director

Date