

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2007 8:00 am
Secretary of State

03-23-2007 90030 050 ***150.00

DOCUMENT # F04822

1. Entity Name
NINO WHOLESALE, INC.



Principal Place of Business
2201 S.W. 31ST AVENUE
PEMBROKE PARK, FL 33009

Mailing Address
2201 S.W. 31ST AVENUE
PEMBROKE PARK, FL 33009

60027851



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02142007

Chg-P

CR2E034.(12/06)

-City & State

City & State

4. FEI Number

59-2049709

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DIFEDE, ANTHONY C
2920 HIDDEN HOLLOW LANE
DAVIE, FL 33328

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME DIFEDE, ANTHONY C
STREET ADDRESS 2920 HIDDEN HOLLOW LANE
CITY-ST-ZIP DAVIE, FL 33328

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☐ Delete
NAME DIFEDE, ANTONIO L
STREET ADDRESS 3104 PEACHTREE CIR.
CITY-ST-ZIP DAVIE, FL 33328

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☐ Delete
NAME WHITSON, RICKI
STREET ADDRESS 530 N. RAINBOW DRIVE
CITY-ST-ZIP HOLLYWOOD, FL 33021

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☐ Delete
NAME WHITSON, LUCIA
STREET ADDRESS 530 N. RAINBOW DRIVE
CITY-ST-ZIP HOLLYWOOD, FL 33021

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ST ☐ Delete
NAME DIFEDE, MARIA
STREET ADDRESS 3104 PEACHTREE CIRCLE
CITY-ST-ZIP DAVIE, FL 33328

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like-unpowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/21/07

954 981 1001

File

Telephone