## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

F93512 DOCUMENT #
1. Corporation Name

(4)

KAZOO & SON DISTRIBUTORS, INC.

Principal Place of Business

Mailing Address



6290 B 147TH AVE N CLEARWATER FL 34620 US		11248 120TH TERRACE NORTH LARGO FL 34648-2621				te Incorporated (	or Qualified	3a. Date	of Last Re	-
2. Principal Plac		2a. Mailing Address			4. FE	Number		<del></del>	47	pplied For
16290B	147th Ave. No LEAGUREN	26 SAMC				59-221820	?			Not Applicable
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.			<b>5</b> . Ce	rtificate of Status	S Desired			Additional Required
City & State	ac water Fla	City & State			I	ction Campaign ist Fund Contrib	_			May Be to Fees
Zip	Zip Country Zip			,		8. This corporation has liability for intangible ax under s 199.032, Florida Statutes Yes [ 40]				
·	9. Name and Address of Current F				10. Na	me and Addre	ss of New R	legistered /	gent	
			81	Name						
KICZULA, ARLEEN H 11248 120TH TERR NORTH				Street A	Address (P.O.	ress (P.O. Box Number is Not Acceptable)				
LARGO F			83							
			84	City				FL	85 Zij	o Code
SIGNATURE	Signature, typed or printed name of registered agent and	It lie if applied (NO		int signature re	equired when reinsta	iling) IDITIONS/CHAN	GES TO OFF	H24	96 DIRECTO	DRS IN 12
12.	OFFICERS AND I	JIRECTORS DELETE						•	Change	Addition
TITLE	P	Dereis	1. 1 TITLE		77060	KICZULA 120th FLA.				
NAME	KICZULA, JOHN		1,2 NAME		11248	120 14	TERN	No.C+4		
STHEET ADDRESS	11248 120TH TERRACE N.			t address	LACON	FLA	3464	1,5		
CITY-ST-ZIP	LARGO FL	□ DELETE	1.4 CITY- 2 1 TITUE		7-1-270	7			7 Change	☐ Addition
TITLE	P	L'I perete	l l					L		<u></u>
NAME	KICZULA, ARLEEN H.		2.2 NAME							
STREET ADDRESS	11248 120TH TERRACE N.			T ADDRESS						
CITY-ST-ZIP	LARGO FL	☐ DELETE	24 CITY- 3 1 TITLE					·	Change	☐ Addition
TITLE	td Kiczula, arleen h		3.2 NAME					•		
NAME	11248 120TH TERR NORTH			et address						
STREET ADDRESS	LARGO FL		3.3. 31h							
CITY-ST-ZIP TITLE	DANGOTE	[7] DELETE	4. 1 Titl					[	Change	Addition
!		<b>_</b>	42 NAM							
NAME				1 ADDRESS						
STREET ADDRESS			4.4 CITY							
CITY-ST-ZIP TITLE		☐ DELETE	5 1 TITL					]	Change	Addition
NAME		- <del>-</del>	5.2 NAM	Ē						
STREET ADDRESS			53 STRE	ET ADDRESS						
CITY-ST-2IP			: 54 CiTY							
TITLE		☐ DELETE	6 1 TITL						Change	Addition
NAME			6 2 NAM							
STREET ADDRESS			6.3 STRE	ET ADDRESS						
0.TV 07 7/D			6.4 CITY	- ST - <b>Z</b> IP						
	L y certify that the information supplied wi the information indicated on this annua	th this filing is voluntarily fun	nished and do	es not qua	alify for the exc	emption stated in	Section 119	9.07(3)(k), Fk	orida Statu	rtes. I further

oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Cappears in Block 12 or Block 13 if changed, or on an attachment with an address.