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FILED
May 19 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Morfham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F97000000436 (2)

1. Corporation Name

J.J. TAYLOR DISTRIBUTING MIAMI/KEY WEST, INC.

Principal Place of Business

Mailing Address

3505 NW 107TH ST.
MIAMI FL 33187

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/27/1997

4. FEI Number

65-0731431

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 11780 US Hwy. #1
Suite, Apt. #, etc.

22 City & State

27 Suite 204
City & State

23 Zip

Country

28 North Palm Beach, FL
City & State

24 Zip

Country

29 33408
Zip

30 USA
Country

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DC ☐ DELETE
NAME TAYLOR, JOHN J JR
STREET ADDRESS 11708 US HWY 1
CITY-ST-ZIP NORTH PALM BEACH FL 33408

TITLE SD ☐ DELETE
NAME TAYLOR, JOHN J III
STREET ADDRESS 11708 US HWY 1
CITY-ST-ZIP NORTH PALM BEACH FL 33408

TITLE D ☐ DELETE
NAME DESPLAINES, HENRI J
STREET ADDRESS 11708 US HWY 1
CITY-ST-ZIP NORTH PALM BEACH FL 33408

TITLE P ☐ DELETE
NAME CUETO, ALFONSO A
STREET ADDRESS 11708 US HWY 1
CITY-ST-ZIP NORTH PALM BEACH FL 33408

TITLE V ☒ DELETE
NAME FERNANDEZ, ALFONSO G
STREET ADDRESS 3505 NW 107TH ST.
CITY-ST-ZIP MIAMI FL 33187

TITLE V ☒ DELETE
NAME REAGAN, JAMES
STREET ADDRESS 3505 NW 107TH ST.
CITY-ST-ZIP MIAMI FL 33187

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 the form with an address.

SIGNATURE:

Henri J. DesPlaines

Henri J. DesPlaines, E.V.P.

5/7/98 561-771-1777

CP2E034 (10/97)