FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H41892

HEYER-METRO DISTRIBUTORS, INC.

Mailing Address

(1)

FILED May 16 1997 8:00am Secretary of State

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8305-1 GARDEN ROAD RIVIERA BEACH FL 83404		8305-1 GARDEN ROAD RIVIERA BEACH FL 33404-1739						
					3. Date Incorporated or Qualified 02/08/1985	3a. Date of L 04/23/19		
2. Principal Place of Business 2a.		2a. Mailing Address	Ra. Mailing Address RoAD				Applied For	
21 5221 S	ST. AUGUSTINE	26 5221 ST. A	UGUS	TINE	59-2494442		Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.	:		5. Certificate of Status Desired		.75 Additional ee Required	
City & State City & State City & State City & State		1 /	SONVILLE, FL		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24 322		Zip Country 8. This corporation has liability for intangit				☐ Yes ☐ No	ider s. 199.032,	
	9. Name and Address of Current	Registered Agent		7	10. Name and Address of New R	egistered Agent		
	LIAM ELY		81	Name				
5221 ST AUGUSTINE RD			82	82 Street Address (P.O. Box Number is Not Acceptable)				
JAC	KSONVILLE FL 32207		83					
			63	']				
			84	City		F1 85	Zip Code	
11. Pursuant t	to the provisions of Sections 607 0502	and 607 1508 Florida Statut	es the above	re-named co	orporation submits this statement for the		ring its registered	
office or re	egistered agent, or both, in the State of	of Florida, Such change was a	authorized b	y the corpo	ration's board of directors. I hereby acce	ept the appointme	ent as registered	
-	m lamiliar with, and accept the obligat	ions of, 26000 to 007.0000, Fil	orioa giaidie	15.	•		,	
SIGNATURE	Signature, lyped or printed name of registered agent	and title if applicable (NOT	F. Hegislered Ag	ient signature re-	paired when roinstating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFI			
TITLE	80	DELETE	11 THUE		VP	Ch	ange 🔲 Addition	
NAME	RUSSI, DANIEL		1,2 NAME		TAMEC W DVAN		-	
STREET ADDRESS	590 EMERALD WAY E		1,3 STREE	1 ADDRESS	JAMES W. RYAN			
CITY-ST-ZIP	DEERFIELD BEACH FL		1,4 CITY -	\$1-ZIP	15 TOBEY VILLAGE O			
TITLE	POT	DELETE	2 1 THLE		PITTSFORD, NY 1453	.⊿ ∐ Ch	nange 🔲 Addition	
NAME	ELY, WILLIAM		2.2 NAMi		FILISTORD, NI 1450	,-1		
STREET ADORESS	4048 E AVE ROCHESTER NY			1 ADDRESS			}	
CITY-ST-ZIP	NOCHESIEN IVI	DELETE	2 4 CI1Y	ST-ZIP				
TITLE NAME		□ Dereit	31 THILE	-		. ∟ Ch	nange 🗀 Addition	
STREET ADDRESS			3.2 NAME	3.4000000				
CITY-ST-ZIP			3.3 SIRE	T ADDRESS			ļ	
TITLE		DELETE	4.1 UILE	51-21r		☐ Ch	iange Addition	
NAME			4. 2 NAME				La racinon	
STREET ADDRESS				1 ADDRESS				
CITY-ST-ZIP			4.4 CITY-					
TITLE		DELETE	5.1 TITLE			☐ Ch	ange Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	1 ADDRESS			Į	
CITY-ST-ZIP			5.4 CITY -	S1-ZIF				
TITLE		☐ DELETE	6.1 TITLE			☐ Ch	nange 🔲 Addition	
NAME			6.2 NAM€				(
STREET ADDRESS			63 STREE	1 ADDRESS				
CITY-ST-ZIP			64 CHTY-	\$1 - ZIP				

14. I do 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 an attachment with an address,