

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L00569

FILED
Jan 16, 2012
Secretary of State

Entity Name: PREMIER DISTRIBUTOR OF MIAMI, CORP.

Current Principal Place of Business:

% CESAR A. ZORRILLA
561 E 58TH ST
HIALEAH, FL 33013

New Principal Place of Business:

% CESAR A. ZORRILLA
1635 WEST 40TH ST.
HIALEAH, FL 33012

Current Mailing Address:

% CESAR A. ZORRILLA
561 E 58TH ST
HIALEAH, FL 33013

New Mailing Address:

% CESAR A. ZORRILLA
1635 WEST 40TH ST.
HIALEAH, FL 33012

FEI Number: 65-0138114

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZORRILLA, CESAR A.
561 EAST 58TH STREET
HIALEAH, FL 33013 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

OFFICERS AND DIRECTORS:

Title: PTD
Name: ZORRILLA, CESAR A.
Address: 561 E 58TH ST
City-St-Zip: HIALEAH, FL 33013

Title: SD
Name: ZORRILLA, NANCY
Address: 561 E 58TH ST.
City-St-Zip: HIALEAH, FL 33013

Title: V
Name: ZORRILLA, RICARDO M
Address: 561 E 58 ST
City-St-Zip: HIALEAH, FL 33013

Title: V
Name: ZORRILLA, ELIZABETH
Address: 561 E 58 ST
City-St-Zip: HIALEAH, FL 33013

Title: V
Name: CERVANTES, NANCY B
Address: 561 E 58 ST
City-St-Zip: HIALEAH, FL 33013

I hereby 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 all other like empowered.

SIGNATURE: CESAR A ZORRILLA

PTD

01/16/2012

Electronic Signature of Signing Officer or Director

Date