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FILED
May 16 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # L65694 (6)

1. Corporation Name

ALPHA & OMEGA DISTRIBUTORS, INC.

Principal Place of Business

1444 SE 15TH COURT
C/O GEORGE GYURTSK
DEERFIELD BEACH FL 33441

Mailing Address

1444 SE 15TH COURT
C/O GEORGE GYURTSK
DEERFIELD BEACH FL 33441-7341

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

GYURTSK, GEORGE
1444 SE 15TH COURT
DEERFIELD BEACH FL 33441

3. Date Incorporated or Qualified
04/16/1990

3a. Date of Last Report
08/08/1996

4. FEI Number
65-0188567

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

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
agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes

I, the above-named corporation submits this statement for the purpose of changing its registered
agent by the corporation's board of directors. I hereby accept the appointment as registered
agent.

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
NAME

D
GYURTSK, GEORGE
1444 SE 15TH COURT
DEERFIELD BEACH FL

STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the
information indicated on this annual report or supplemental annual report is true and
I am an officer or director of the corporation or the receiver or trustee empowered to
appear in Block 12 or Block 13 if changed or on an attachment with an address.

13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

omption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the
signature and that my signature shall have the same legal effect as if made under oath; that
I execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

George Gyurtsk

4/27/97

CR2E034 (9/96)