

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
Tallahassee, Florida 32399-0400

DOCUMENT # **MO2480** (5)

1. Corporation Name
JOAQUIN DISTRIBUTORS, INC.

Principal Office (Mailing Address) Mailing Address
% TERESITA CASAJUANA **% TERESITA CASAJUANA**
781 NW 76 AVE. **781 NW 76 AVE.**
MIAMI FL 33126 **MIAMI FL 33126**

RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
MAY 20 1995
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(DO NOT WRITE IN THIS SPACE)

2. Principal Office (Mailing Address)		2a. Mailing Address		3. Date incorporated or organized	3a. Date of Last Report
21		26		07/05/1984	04/18/1994
22		27		4. FEI Number	Applied For
23		28		59-2450339	Not Applicable
24		29		5. Certificate of Status (Current)	<input type="checkbox"/> \$8.75 Additional Fee Required
25		30		6. Election Certificate (Domestic)	<input type="checkbox"/> \$5.00 May Be Added to Fees
25		30		7. This corporation has liability for advertising tax under S. 199.032 Florida Statute	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CASAJUANA, TERESITA 781 NW 76 AVE. MIAMI FL 33126				81	Name		
				82	Street Address (Do Not Include P.O. Box Number or Not Applicable)		
				83	City		
				84	FL	85	Zip Code

11. Pursuant to the provisions of Sections 607.05, 607.06, and 607.07, Florida Statutes, the above named corporation certifies the statement for the purpose of changing its registered office or registered agent or both in the State of Florida. This change was authorized by the corporation's board of directors, thereby accepting the appointment as registered agent. I am hereby withdrawing the complete responsibility of the current registered office and agent.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
OFFICER	NAME AND ADDRESS	1. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	DS CASAJUANA, TERESITA 12800 SW 100 AVE. MIAMI FL	2. STREET ADDRESS	
	PD CASAJUANA, JOAQUIN 12800 SW 100 AVE. MIAMI FL	3. CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	V VANTASSEL, ALINA 780 SW 133RD AVE. MIAMI FL	4. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		5. STREET ADDRESS	
		6. CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		7. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		8. STREET ADDRESS	
		9. CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		10. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		11. STREET ADDRESS	
		12. CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not apply for this corporation dated in accordance with Florida Statute. I further certify that the information included on this annual report or supplementary statement is true and accurate and that the signatures shall have the same legal effect as if made under oath. That I am an officer or director of this corporation or the person or persons empowered to execute this report as required by Chapter 607, Florida Statute, and that my name appears in Block 12 of this filing report or in an all-in-one filing with an address.

SIGNATURE: *Teresita Casajuna* 4-27-95 305-261-0911
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR