

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

cal 2

DOCUMENT #P00000036859  
1. Entity Name  
P & F DISTRIBUTION SYSTEM, INC.

**FILED**

02 AUG 21 PM 12:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
100007662941--8  
-09/11/02--01046--002  
\*\*\*\*\*300.00 \*\*\*\*\*150.00

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
1139 NW 22 AVENUE  
Suite, Apt. #, etc.  
City & State  
MIAMI, FL  
Zip  
33125  
Country  
US

3. Mailing Address  
1139 NW 22 AVENUE  
Suite, Apt. #, etc.  
City & State  
MIAMI, FL  
Zip  
33125  
Country  
US

4. FEI Number  
65-0998802  
Applied For  
Not Applicable


5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent  
Name  
FERNANDO FLORES  
Street Address (P.O. Box Number is Not Acceptable)  
7024 SW 38 COURT  
City  
MIRAMAR  
FL  
Zip Code  
33023

8. 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  (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

January 1 - May 1 Fee is \$150.00  
After May 1 Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	(P) FERNANDO FLORES	7024 SW 38 COURT	MIRAMAR, FL 33023
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
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TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

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IN THIS SPACE**

13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:  FERNANDO FLORES 08/20/02  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FLORES & FOOD CORP .  
DOC. P01000061987  
P&F DISTRIBUTION SYSTEM, INC.  
DOC. P00000036859

*Not*

TO: DIVISION OF CORPORATION  
P.O. BOX 6327  
TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

AS PER YOUR INSTRUCTIONS, ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE OF SUCH REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS AND TO WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

CORDIALLY

  
FERNANDO FLORES  
PRESIDENT