2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000008313

Entity Name: CORPORATE DISTRIBUTION SERVICES, INC.

FILED Mar 15, 2002 8:00 AM Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
9501 PALI TAMPA, F	M RIVER RD L 33619					
Current Mailing Address:			New Mailing Address:			
9501 PALI TAMPA, F	M RIVER RD L 33619					
FEI Number: 65-1070730 FEI Number Applied For()		FEI Number Not Applicable () Certificate of Status De		Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:			
BARTHOLOMEW, JONATHAN T 9501 PALM RIVER RD TAMPA, FL 33619			BARTHOLOMEW, MARIE 9501 PALM RIVER RD TAMPA, FL 33619			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing i	ts registered	d office or registered agent, or both,	
SIGNATURE: MARIE BARTHOLOMEW				03/15/2002		
Electronic Signature of Registered Agen			ent	Date		
-	_	o satisfy its Intangible Tax filing req g Trust Fund Contribution().	uirement and elects to d	do so (X).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	*		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	BARTHOLO	()Change(X)Addition MEW, MARIE RIVER ROAD 33619	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	BARTHOLO	() Change (X) Addition MEW, BRADFORD RIVER ROAD 33619	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	COLYER, JA	RIVER ROAD	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JONATHAN BARTHOLOMEW D 03/15/2002