

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000030579

FILED
Feb 05, 2005
Secretary of State

Entity Name: NORTON DISTRIBUTION COMPANY, INC.

Current Principal Place of Business:

2863 NORTH LAKE BLVD
STE 3
WEST PALM BEACH, FL 334031525 US

New Principal Place of Business:

Current Mailing Address:

1940 HARRISON ST
STE 201 B
HOLLYWOOD, FL 33020 US

New Mailing Address:

FEI Number: 65-1093463 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JUMPING JAX TAX INC
1940 HARRISON ST
STE 201B
HOLLYWOOD, FL 33020 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NORTON, PETER
Address: 2863 NORTH LAKE BLVD STE 3
City-St-Zip: LAKE PARK, FL 334031525 US

Title: SD () Delete
Name: NORTON, EUVALINE
Address: 2863 NORTH LAKE BLVD STE 3
City-St-Zip: LAKE PARK, FL 334031525 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: NORTON DISTRIBUTION, COMPANY LTD
Address: SHOP 3 ARBORVIEW SHOPPING CENTRE
City-St-Zip: KINGSTON, 17 JAMAICA WI

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: PETER NORTON

PD

02/05/2005

Electronic Signature of Signing Officer or Director

_____ Date