

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 02, 2002 8:00 am
Secretary of State

09-02-2002 90146 043 ***150.00

DOCUMENT # P01000070834

1. Entity Name
DISTRIBUTION PARTNERS, INC.

Principal Place of Business
1590 NORTH MEADOWCREST BLVD.
CRYSTAL RIVER FL 34429

Mailing Address
1590 NORTH MEADOWCREST BLVD.
CRYSTAL RIVER FL 34429

2. Principal Place of Business
3928 N. BLAZINGSTAR WAY
BEVERLY HILLS, FL 34465
 Suite, Apt. #, etc.

3. Mailing Address
3928 N. BLAZINGSTAR WAY
BEVERLY HILLS, FL 34465
 Suite, Apt. #, etc.

City & State
BEVERLY HILLS, FLORIDA

City & State
BEVERLY HILLS, FLORIDA

4. FEI Number
59-3743250

Applied For
 Not Applicable

Zip
34465

Country
USA

Zip
34465

Country
USA

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

6. Name and Address of Current Registered Agent

CROSS, DAVID M
3928 N. BLAZINGSTAR WAY
BEVERLY HILLS FL 34465

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(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)

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
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 **P** ☐ Delete
 NAME **CROSS, DAVID M**
 STREET ADDRESS **1590 N. MEADOWCREST BLVD.**
 CITY-ST-ZIP **CRYSTAL RIVER FL 34429**

TITLE **V** ☒ Delete
 NAME **CONARD, GREG E**
 STREET ADDRESS **1590 N. MEADOWCREST BLVD.**
 CITY-ST-ZIP **CRYSTAL RIVER FL 34429**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PRESIDENT** ☐ Change ☐ Addition
 NAME **DAVID M. CROSS**
 STREET ADDRESS **3928 N. BLAZINGSTAR WAY**
 CITY-ST-ZIP **BEVERLY HILLS, FL 34465**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(352) 527-3508

CR2E034 (4/02)



Distribution Partners Inc.

3928 N. Blazingstar Way
Beverly Hills, Florida USA 34465
Phone (352) 527-3508

August 23, 2002

Attention: Division of Corporations

I have learned that your office had tried to previously send a blank Uniform Business Report of which Distribution Partners, Inc. *did not* receive. Distribution Partners, Inc. has requested and received the blank report that has now been filled out. Please accept the Distribution Partners, Inc. check #1011 in the amount of \$150.00 (one hundred fifty dollars) as proper payment for the filing fee. If there is any area of the report incomplete or not satisfactorily completed please notify us immediately at the above address and or call (352) 527-3508.

Thank you for your time.

David M. Cross President
Distribution Partners, Inc.

"Offering the best products at the best prices"