

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000073642

1. Entity Name
NANA WHOLESALE DISTRIBUTION CENTER, INC.



Principal Place of Business
180 NW 62ND ST
MIAMI, FL 33150

Mailing Address
180 NW 62ND ST
MIAMI, FL 33150



04272004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0675186

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PRINCE, VELIUS
7300 NW 2ND AVE
MIAMI, FL 33150

DO NOT WRITE
IN THIS SPACE

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000152984

05/04/04-80108-008 158.75

10. OFFICERS AND DIRECTORS

TITLE P
NAME PRINCE, VELIUS
STREET ADDRESS 7300 NW 2ND AVE
CITY-ST-ZIP MIAMI, FL 33150

TITLE V
NAME WALLACE, JEAN
STREET ADDRESS 199 NE 62 ST
CITY-ST-ZIP MIAMI, FL 33150

TITLE S
NAME MUHAMMAD, MELVIN
STREET ADDRESS 22 NW 62ND ST
CITY-ST-ZIP MIAMI, FL 33150

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Velius Prince*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/04

Date

Daytime Phone #