

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000095125

Entity Name: Y C DISTRIBUTORS, INC.

FILED
Apr 21, 2005
Secretary of State

Current Principal Place of Business:

245 SW 31ST ST
FT LAUDERDALE, FL 33315

New Principal Place of Business:

3738 SW 30TH AVE
FT LAUDERDALE, FL 33312

Current Mailing Address:

245 SW 31ST ST
FT LAUDERDALE, FL 33315

New Mailing Address:

3738 SW 30TH AVE
FT LAUDERDALE, FL 33312

FEI Number: 16-1626180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCMILLAN, TIM
245 SW 31ST ST
FT LAUDERDALE, FL 33315 US

Name and Address of New Registered Agent:

MCMILLAN, TIM
3738 SW 30TH AVE
FT LAUDERDALE, FL 33312 US

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: TIMOTHY MCMILLAN

04/21/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCMILLAN, TIM
Address: 245 SW. 31ST STREET
City-St-Zip: FORT LAUDERDALE, FL 33315

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCMILLAN, TIM
Address: 3738 SW 30TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: PD () Change (X) Addition
Name: PEARSON, GILLIAN
Address: 3738 SW 30TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33312

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: TIMOTHY MCMILLAN

PD

04/21/2005

Electronic Signature of Signing Officer or Director

Date