

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000117221

FILED
Apr 30, 2004
Secretary of State

Entity Name: ABN DISTRIBUTION COMPANY

Current Principal Place of Business:

13115 SW 122 AVENUE
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

13115 SW 122 AVENUE
MIAMI, FL 33186

New Mailing Address:

FEI Number: 56-2408908

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUIZ-GONZALEZ, BARBARA E ESQ.
600 BRICKELL AVENUE
SUITE 500
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

RUIZ-GONZALEZ, BARBARA E ESQ.
12120 SW 80 STREET
MIAMI, FL 33183 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:

Electronic Signature of Registered Agent

04/30/2004

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GONZALEZ, JOSE A
Address: 13115 SW 122 AVENUE
City-St-Zip: MIAMI, FL 33186

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S () Change (X) Addition
Name: RUIZGONZALEZ, BARBARA
Address: 12120 SW 80 STREET
City-St-Zip: MIAMI, FL 33183

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: BARBARA RUIZ-GONZALEZ

S

04/30/2004

Electronic Signature of Signing Officer or Director

Date