## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000129497

Title:

Name:

Address:

City-St-Zip:

( ) Delete

Entity Name: B & T DISTRIBUTORS, INC.

FILED Feb 26, 2007 Secretary of State

Entity Nan	ie: B&IDISI	RIBUTURS, INC.					
Current Principal Place of Business:			New Prince	New Principal Place of Business:			
7221 NW 79TH TERR MEDLEY, FL 33166				7302 NW 79TH TERRACE MEDLEY, FL 33166			
Current Mailing Address:			New Maili	New Mailing Address:			
8181 NW 3 DORAL, FL	6 CT, STE 20C . 33166		7302 N.W. MEDLEY, I	79TH TERRA FL 33166	ACE		
FEI Number:	20-1625195	FEI Number Applied For ( )	FEI Number Not App	licable()	Certificate of Status Desired (	ı	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
BARROSO 7221 SW 79 MEDLEY, F		6	7302 N.W	BARROSO, RAFAEL A 7302 N.W 79TH TERR MEDLEY, FL 33166 US			
The above in the State	named entity so of Florida.	ubmits this statement for the pu	ırpose of changing i	ts registered o	office or registered agent, or b	oth,	
SIGNATURE:				02/26/2007			
	Electronic	Signature of Registered Ager	nt		Date		
Election Cam	paign Financing	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D ()[ BARROSO, RAFA 7221 NW 79TH MEDLEY, FL 33	TER	Title: Name: Address: City-St-Zip:	D (X BARROSO, RA 7302 NW 79T MEDLEY, FL	H TER		
Title: Name: Address: City-St-Zip:	D ()[ TAWIL, JOSE G 7221 NW 79TH T MEDLEY, FL 33		Title: Name: Address: City-St-Zip:	D (X TAWIL, JOSE 7302 NW 79T MEDLEY, FL	HTER		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: RAFAEL A. BARROSO D 02/26/2007

( ) Change (X) Addition

BARROSO, EVA B 7302 N.W. 79TH TERRACE

MEDLEY, FL 33166