

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90051 023 ***150.00

DOCUMENT # P05000039628 1. Entity Name DUKES DISTRIBUTION COMPANY, INC.					
Principal Place of Business 2861 CENTERPORT CIRCLE POMPANO BEACH, FL 33064				Mailing Address 2861 CENTERPORT CIRCLE POMPANO BEACH, FL 33064	
2. Principal Place of Business 2200 NW 32 Street, Suite 1400		3. Mailing Address 2200 NW 32 Street			
Suite, Apt. #, etc. Pompano Beach, FL		Suite, Apt. #, etc. Suite 1400			
City & State Pompano Beach, FL		City & State Pompano Beach, FL			
Zip 33069		Country USA		01162006 Chg-P CR2E034 (11/05)	
4. FEI Number 20-2535868		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SCHECTER, MARK S 100 NE 3RD AVENUE SUITE 620 FORT LAUDERDALE, FL 33301		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>			
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 _____ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P KUZNETZ, LYSE 2881 CENTERPORT CIRCLE POMPANO BEACH, FL 33064 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V KUZNETZ, MIKE 2861 CENTERPORT CIRCLE POMPANO BEACH, FL 33064 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u><i>L. Kuznetz</i></u> 1-17-06 954-974-6730 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					