2007 FOR PROFIT CORPORATION ANNUAL REPORT

| DOCUMENT # P06000055607 | | | | | FILED | | | |
|---|--|--|--|--|--|--|-----------------------------|--|
| 1. Entity Nam S&DDIS | STRIBUTORS, CORP | | | | 1 | rivers seems | | |
| | | | | 7 | - · | 16 PM 12: 44 | | |
| Principal Place of Business | | Mailing Address | | | JEURETARY OF STATE TALLAHASSEE, FLORIDA | | | |
| 231 MENDOZA AVE., SUITE 8 Coral Gables, Fl. 33134 | | 231 MENDOZA AVE., SUITE 8 CORAL GABLES, FL 33134 | | | {ALLAHA | SSEE, FLURIDA | | |
| COIVIL GADI. | LO, IL 33134 | Ugithe Unities, TE 33131 | | 1 (1000) | L BONG SIMI BERLI BONK I | edir Berer Biret Sime Birir Belli is | 616T) U (BE) | |
| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address | · · · · · · | - | | | | |
| Suite, Apt. #, etc. | | P.O. 60x 520503 | | |) nome givi nom paul i | esin eaisi ensi sina enti sem is | 8:20) H 120) | |
| Suite, Apt. | . #, etc. | Suite, Apr. #, etc. | | 05152007 | Chg-P | CR2E034 (12/06) | | |
| City & State | | City & State MIAMI, FL | | 4. FEI Numb | o - 259 | 0111 V | pplied For ot Applicable | |
| Zip | Country | ************************************** | Country US | 5. Certificate | of Status Desired | \$8.75 Ad | ditional | |
| | 6. Name and Address of Current I | 33\57 | - 00 | | | Fee Require | ed | |
| N | | | | 7. Name and Address of New Registered Agent | | | | |
| PINA, DIA 231 MENI | NA M DOZA AVE., SUITE,8 | | Street Address | s (P.O. Box Numb | ex is Not Accepta | ble) // (| 40 | |
| CORAL GABLES, FL 33134 | | | 231 | 7720 | DOZA | MV. 0417 | <u> </u> | |
| | | _ | City | | | Zin Cod | le . | |
| 9 Tho obour | a parmort antity of themitta this of standard for | the burness of changing its regi | | M GAZ | 3/25 | FL 33 | 134 | |
| the obligat | named entity submits this statement for tions of registered agent. | The purpose of changing its regi | istered office or regis | tered agent, or oc | AII, HI THE STATE OF | monda. Tam jamiliar willi, | , али ассері | |
| SIGNATURE. | 1 / Min / | (lew) | | | | | | |
| | Signature, typed or printed name of registered agent a | ind fittle if applicable. (NOTE: Reg | pistered Agent signature requ | ired when reinstating) | | DATE | | |
| | LE NOW!!! FEE IS \$150.00 ue by September 14, 2007 | Election Campaign F Trust Fund Contribut | | 5.00 May Be dded to Fees | In accordance corporation d | e with s. 607.193(2)(b), id not receive the prior | F.S., the notice. | |
| 10. | OFFICERS AND | DIRECTORS | 11. | ADDITIONS | CHANGES TO O | FFICERS AND DIRECTOR | S IN 11 | |
| TITLE NAME | PD PENA, DIANA M | ☐ Delete | TITLE | | | Change | Addition | |
| STREET ADDRESS | 231 MENDOZA AVE., SUITE 8 | | STREET ADDRESS | 20 | 00103 | 197942 8007 **150. | | |
| CITY-ST-ZIP | CORAL GABLES, FL 33134 | ☐ Delete | CITY-ST-ZIP | 05/24 | . <u>/107011021</u> | 8007 ++150. □ Change | | |
| NAME | ARTAZA, JORGE S | | NAME | | | □ cresits | ☐ Addition | |
| STREET ADDRESS CITY-ST-ZIP | 231 MENDOZA AVE., SUITE 8 CORAL GABLES, FL 33134 | | STREET ADDRESS CITY-ST-ZIP | | | | | |
| TITLE | CORAL GABLES, FL 33134 | □ Delete | TITLE | | · · · · · · · · · · · · · · · · · · · | ☐ Change | Addition | |
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| | | | NAME Street address | | | | | |
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| STREET ADDRESS CITY-ST-ZIP | | | | | | | | |
| STREET ADDRESS | | ☐ Delete | TITLE . | | | ☐ Change | Addition | |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | | ☐ Delete | TITLE NAME STREET ADDRESS | | K. Eckel | □ Change MAY 1 6 2007 | · | |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | continue that the information of the first little | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | and in Charter ** | | MAY 1 6 2007 | ! | |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | certify that the information supplied with on this report or supplemental report is poration or the receive or Justee emor | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ned in Chapter 11 le same legal effe 307, Florida Statu | | MAY 1 6 2007 | ! | |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | certify that the information supplied with the on this report or supplemental report is sporation or the receives or flustee emporation or the receives or flustee emporation or an attachment with an address, we | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ned in Chapter 11 ne same legal effe 507, Florida Statut | | MAY 1 6 2007 | ! | |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | 1 / less ans | this filing does not quality for the true and accorate and that my swered to execute this report as now, all other like empowered. | TITLE NAME STREET ADDRESS CITY-ST-ZIP e exemptions contain ignature shall have the | ned in Chapter 11 ne same legal effe 307, Florida Statut | | MAY 1 6 2007 | ! | |