2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000075205

Address:

City-St-Zip:

3319 SW 173RD TERRACE

MIRAMAR, FL 33029 US

FILED Mar 31, 2009 Secretary of State

Entity Name: SERVICIOS ZULIANO DE DISTRIBUCION, INC.					
Current Principal Place of Business:			New Principal Place o	f Business:	
3319 SW 1 MIRAMAR,	73RD TERRA FL 33029	ACE US			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
3319 SW 1 MIRAMAR,	73RD TERRA FL 33029	ACE US			
FEI Number:	20-4981562	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
JAVIER, RAMON E ESQ 2500 HOLLYWOOD BLVD. STE. 309 HOLLYWOOD, FL 33020 US			2500 HÖLLYWOOD BL STE 306	JAVIER, RAMON E ESQ 2500 HOLLYWOOD BLVD STE 306 HOLLYWOOD, FL 33020 US	
The above in the State		submits this statement for the pu	rpose of changing its registered	office or registered agent, or both,	
SIGNATURE: JAVIER,RAMON E				03/31/2009	
	Electro	nic Signature of Registered Ager	nt	Date	
Election Cam	paign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (MOGOLLON, N 3319 SW 173F MIRAMAR, FL	RD TERRACE	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:			Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name:) Delete ANCHEZ, MONICA	Title: (Name:) Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: MOGOLLON SANCHEZ, MONICA T 03/31/2009