FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State

	1996		DIVISION	OF CORPORA	TIONS			
DOCU	MENT #	P22460	(0)					
•	RIBUTOR SALES	SOUTHEAST	, INC.			į		
	e of Business		Mailing Address					INGE OFFIE BIREFE PO
2051 GREENLEAF AVE., P.O. BOX 696 ELK GROVE VILLAGE IL 60007-5505		206	2051 Greenleaf ave P.O. Box 696 Elk Grove Village II. 60007-2505					
US	TE VIESTOR IE OCCUPAÇ		ETY QUONE AITTH	JE 16 00007-250	us	3. Date incorporated or Qualified 12/30/1988	3a. Date of Last 02/01/	Report 1995
Pencipal P	Place of Business		2a. Mailing Address 26			4. FEI Number 36-3343765		Applied For
Suite, Apt.	#, etc		Suite, Apt. #, etc.			5. Certificate of Status Desired		Not Applica 5 Additional
City & Stat	10		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.	Required May Be
Ziji)	Соціі 25]	ntry	Zıp	Count	ry	8. This corporation has liability for	r intangible tax under	led to Fees s 199.032,
		Iress of Current R	29 egistered Agent	30		Florida Statutes Yes 10. Name and Address of New I	s No Registered Agerit	
THAXT	ON, WILLIAM			8				
923 G	OLFVIEW STREET			8	2 Street Add	dress (P.O. Box Number is Not Acceptal	bie)	
TAMPA	A FL 33629			B	3			
				<u> </u>			Ta-1 -	Zip Code
familiar wi	to the provisions of Se red agent, or both, in th ith, and accept the obli	ctions 607.0502 and he State of Florida. S gations of, Section 6	d 607.1508, Florida Statu Such change was author 607.0505, Florida Statute	ites, the above	4 City p-named corporation's box	oration submits this statement for the pu ard of directors. I hereby accept the app	<u> </u>	<u> </u>
familiar wi	ith, and accept the obli	gations of Section 6	607.0505, Florida Statule ille iraqiileatili († IRECTORS	utes, the above ized by the cores.	n-named corporation's boo	oration submits this statement for the pu and of directors. I hereby accept the app and when renstating! ADDITIONS/CHANGES TO OFF	JUPOSE of changing its pointment as registered	registered of d agent. I am
familiar wi GNATURE	Sgradure, bywel or printed na	gations of, Section 6 Le of registered agent and D	607,0505, Florida Statute மார்ஷ்க்கைக்க	utes, the above ized by the cores. 13. 1 TITLE	p-named corporation's boo	and or directors. Thereby accept the app	JUPOSE of changing its pointment as registered	registered of d agent. I am ORS IN 12
familiar wi BNATURE F ME BE! AUDRESS	Sgradus, Spector printed nate PD LEAVITT, SANI PO BOX 696 N	gations of, Section 6 is of registrate and Di OFFICERS AND DI FORD IA	607.0505, Florida Statule ille iraqiileatili († IRECTORS	utes, the above ized by the cores. Registered Ag 13. 1 1 TITLE 12 NAME	p-named corporation's boo	and or directors. Thereby accept the app	TL	registered of id agent. I an ORS IN 12
familiar wi GNATURE F ME EE! ATORESS (-S!-ZP)	PD LEAVITT, SANI PO BOX 696 N ELK GROVE IL	gations of, Section 6 is of registrate and Di OFFICERS AND DI FORD IA	607.0505, Florida Statuli illo il aggicotti IRECTORS	utes, the above ized by the cores. IT I TITLE 12 NAME 1.3 SIREE 1.4 CITY-	-named corporation's boo	and or directors. Thereby accept the app	ITPOSE of changing its pointment as registered DATE. FICERS AND DIRECT Change	registered of d agent. I am ORS IN 12
FAMILIAN WITH THE STATE OF THE	PD LEAVITT, SANI PO BOX 696 N ELK GROVE IL SD HAMMER, JOE	gations of, Section 6 is of registerial agricultural in OFFICERS AND DI FORD IA	607.0505, Florida Statule ille iraqiileatili († IRECTORS	utes, the above ized by the corps. COTE Registered Ap 13. 1 1 TITLE 12 NAME 1.3 SIREE	-named corporation's boo	and or directors. Thereby accept the app	TL	registered of d agent. I an ORS IN 12
FAMILIAN WE FAMILIAN WAS A STATE OF THE STAT	PD LEAVITT, SANF PO BOX 696 N ELK GROVE IL SD HAMMER, JOE PO BOX 696 N	gations of, Section 6 is of registerial agricultural in OFFICERS AND DI FORD IA	607.0505, Florida Statuli illo il aggicati RECTORS DELETE	utes, the above ized by the corps. 13. 11 TITLE 12 NAME 1.3 STREE 1.4 CITY- 2 1 TITLE 22 NAME	-named corporation's boo	and or directors. Thereby accept the app	ITPOSE of changing its pointment as registered DATE. FICERS AND DIRECT Change	registered of degent. I an ORS IN 12
FAMILIAN WITH THE PROPERTY OF	PD LEAVITT, SANI PO BOX 696 N ELK GROVE IL SD HAMMER, JOE	gations of, Section 6 is of registerial agricultural in OFFICERS AND DI FORD IA	607.0505, Florida Statuli ille il agglecata (FRECTIORS) DELETE	utes, the above ized by the corps. 13. 11 TITLE 12 NAME 1.3 STREE 2 NAME 2 3 STREE 2 4 CITY	enamed corporation's booms synature results. El ADDRESS -ST-ZIP	and or directors. Thereby accept the app	PL	registered of d agent. I an ORS IN 12
FAMILIAN WITH THE PROPERTY OF	PD LEAVITT, SANF PO BOX 696 N ELK GROVE IL SD HAMMER, JOE PO BOX 696 N	gations of, Section 6 is of registerial agricultural in OFFICERS AND DI FORD IA	607.0505, Florida Statuli illo il aggicati RECTORS DELETE	ites, the above ized by the corps. 13. 1 1 TITLE 12 NAME 1.3 STREE 22 NAME 23 STREE 24 CITY- 3 1 TITLE	enamed corporation's bounds synature real in the sy	and or directors. Thereby accept the app	ITPOSE of changing its pointment as registered DATE. FICERS AND DIRECT Change	registered of diagent. I arr ORS IN 12 Additio
FAMATURE F GET ATORESS (-ST-ZIP) F GET ADDRESS -ST-ZIP F GET ADDRESS	PD LEAVITT, SANF PO BOX 696 N ELK GROVE IL SD HAMMER, JOE PO BOX 696 N	gations of, Section 6 is of registerial agricultural in OFFICERS AND DI FORD IA	607.0505, Florida Statuli ille il aquicalia (PECTIORS) DELETE	ites, the above ized by the corps. 13. 1 1 TITLE 12 NAME 1.3 SIREE 22 NAME 23 STREE 24 CITY 3 1 TITLE 32 NAME	enamed corporation's bounds synature real in the sy	and or directors. Thereby accept the app	PL	registered of diagent. I arr ORS IN 12 Additio
FAMILIAN WITH THE STATE OF THE	PD LEAVITT, SANF PO BOX 696 N ELK GROVE IL SD HAMMER, JOE PO BOX 696 N	gations of, Section 6 is of registerial agricultural in OFFICERS AND DI FORD IA	607.0505, Florida Statuli ille il aquicalia (PECTIORS) DELETE	ites, the above ized by the corps. 13. 1 1 TITLE 12 NAME 1.3 SIREE 22 NAME 23 STREE 24 CITY 3 1 TITLE 32 NAME	enamed corporation's bounds synature read in the sy	and or directors. Thereby accept the app	PL	registered of diagent. I and ORS IN 12 Additio
FAMATURE F ME LET ADDRESS 7-ST-ZIP F SET ADDRESS 9-ST-ZIP E EL ADDRESS -ST-ZIP E EL ADDRESS	PD LEAVITT, SANF PO BOX 696 N ELK GROVE IL SD HAMMER, JOE PO BOX 696 N	gations of, Section 6 is of registerial agricultural in OFFICERS AND DI FORD IA	607.0505, Florida Statuli ille il aquicalia (PECTIORS) DELETE	utes, the above ized by the corps. 13. 1 1 TITLE 1 2 NAME 2 1 TITLE 2 NAME 2 3 STREE 2 4 CITY 3 1 TITLE 3 2 NAME 3 3 STREE 3 3 NAME	enamed corporation's bounds synature read in the sy	and or directors. Thereby accept the app	PL	registered of d agent. I and ORS IN 12 ORS IN 12 Addition
FAMATURE F ME HE! ADDRESS (-S!-ZP F ME HE ADDRESS -SI ZP E HE ADDRESS -SI ZP E HE ADDRESS -SI ZP E	PD LEAVITT, SANF PO BOX 696 N ELK GROVE IL SD HAMMER, JOE PO BOX 696 N	gations of, Section 6 is of registerial agricultural in OFFICERS AND DI FORD IA	607.0505, Florida Statuli (IRECTORS DELETE	ites, the above ized by the corps. 13. 1 1 TITLE 12 NAME 1.3 SIREE 22 NAME 23 STREE 24 CITY 3 1 TITLE 32 NAME 33 STREE 34 CITY 31 TITLE 32 NAME	enamed corporation's bounds synature read in the sy	and or directors. Thereby accept the app	DATE FICERS AND DIRECT Change	registered of d agent. I and ORS IN 12 ORS IN 12 Addition
FAMILIAN WITH SAME SELECTION OF	PD LEAVITT, SANF PO BOX 696 N ELK GROVE IL SD HAMMER, JOE PO BOX 696 N	gations of, Section 6 is of registerial agricultural in OFFICERS AND DI FORD IA	607.0505, Florida Statuli (IRECTORS DELETE	utes, the above ized by the corps. 13. 1 1 TITLE 12 NAME 2 1 TITLE 22 NAME 23 STREE 24 CITY- 3 1 TITLE 32 NAME 33 STREE 41 TITLE 42 NAME 4 1 TITLE 42 NAME 4 1 TITLE 42 NAME 43 STREE	enamed corporation's bounds synature requirement synature requirement in the synature	and or directors. Thereby accept the app	DATE FICERS AND DIRECT Change	registered of d agent. I and ORS IN 12 ORS IN 12 Addition
FAMILIAN WIRE F REF ADDRESS - ST - ZP E E LADDRESS - ST - ZP	PD LEAVITT, SANF PO BOX 696 N ELK GROVE IL SD HAMMER, JOE PO BOX 696 N	gations of, Section 6 is of registerial agricultural in OFFICERS AND DI FORD IA	607.0505, Florida Statuli (IRECTORS DELETE	utes, the above ized by the corps. 13. 1 1 TITLE 12 NAME 13 STREE 24 CITY- 3 1 TITLE 32 NAME 33 STREE 44 CITY- 4 1 TITLE 42 NAME 43 STREE 44 CITY- 44 CITY-	enamed corporation's bounds synature rest in the sy	and or directors. Thereby accept the app	DATE FICERS AND DIRECT Change Change	registered of d agent. I am ORS IN 12 Addition Addition Addition
FAMILIAN WITH SAME SAME SAME SAME SAME SAME SAME SAME	PD LEAVITT, SANF PO BOX 696 N ELK GROVE IL SD HAMMER, JOE PO BOX 696 N	gations of, Section 6 is of registerial agricultural in OFFICERS AND DI FORD IA	607.0505, Florida Statuli Mediapulcatili RECTORS DELETE DELETE DELETE	utes, the above ized by the corps. 13. 1 1 TITLE 12 NAME 2 1 TITLE 22 NAME 23 STREE 24 CITY- 3 1 TITLE 32 NAME 33 STREE 41 TITLE 42 NAME 4 1 TITLE 42 NAME 4 1 TITLE 42 NAME 43 STREE	en address et address	and or directors. Thereby accept the app	DATE FICERS AND DIRECT Change	registered of d agent. I am ORS IN 12 Addition Addition Addition
FAMILIAN WITH SAME SAME SAME SAME SAME SAME SAME SAME	PD LEAVITT, SANF PO BOX 696 N ELK GROVE IL SD HAMMER, JOE PO BOX 696 N	gations of, Section 6 is of registerial agricultural in OFFICERS AND DI FORD IA	607.0505, Florida Statuli Mediapulcatili RECTORS DELETE DELETE DELETE	utes, the above ized by the corps. 13. 1 1 TITLE 12 NAME 13 STREE 24 CITY- 2 1 TITLE 32 NAME 33 STREE 34 CITY- 4 1 TITLE 42 NAME 43 STREE 44 CITY- 5 1 TITLE 52 NAME	en address et address	and or directors. Thereby accept the app	DATE FICERS AND DIRECT Change Change	registered of d agent. I am ORS IN 12 Addition Addition Addition
FAMILIAN WITH SINATURES F. MR ME HELLADORESS Y-ST-ZIP F. MR GELADORESS (-ST-ZIP E. ADORESS (-ST-ZIP E. F. MR ME GELADORESS (-ST-ZIP F. MR GELADORES	PD LEAVITT, SANF PO BOX 696 N ELK GROVE IL SD HAMMER, JOE PO BOX 696 N	gations of, Section 6 is of registerial agricultural in OFFICERS AND DI FORD IA	GO7.0505, Florida Statuli GOT.0505, Florida Statuli GRECTORS DELETE DELETE DELETE DELETE	utes, the above ized by the corps. 13. 1 1 TITLE 12 NAME 13 STREE 24 CITY- 2 1 TITLE 32 NAME 33 STREE 34 CITY- 4 1 TITLE 42 NAME 43 STREE 44 CITY- 5 1 TITLE 52 NAME	et Address S1-Zip It Address S1-Zip It Address S1-Zip	and or directors. Thereby accept the app	DATE FICERS AND DIRECT Change Change	registered of d agent. I am ORS IN 12 Addition Addition Addition
FAMILIAN WITH SINATURES F. MR HELLATORESS Y-ST-ZP F. ME HELLATORESS Y-ST-ZP F. ME HELLATORESS (-ST-ZP) F. ME HELLATORESS	PD LEAVITT, SANF PO BOX 696 N ELK GROVE IL SD HAMMER, JOE PO BOX 696 N	gations of, Section 6 is of registerial agricultural in OFFICERS AND DI FORD IA	607.0505, Florida Statuli Mediapulcatili RECTORS DELETE DELETE DELETE	utes, the above ized by the corps. 13. 1 1 TITLE 12 NAME 13 STREE 24 CITY- 2 1 TITLE 22 NAME 33 STREE 34 CITY- 4 1 TITLE 42 NAME 43 STREE 44 CITY- 5 1 TITLE 52 NAME 53 STREE	en address et address	and or directors. Thereby accept the app	DATE FICERS AND DIRECT Change Change	registered of d agent. I am on the desired of desired agent. I am on the desired agent. I am on the desired agent. I am on the desired agent age
FAMILIAN WITH THE TABLE TO THE TABLE TABLE TO THE TABLE TABLE TO THE TABLE TABLE TO THE TABLE TABLE TO THE TABLE TABLE TO THE TABLE	PD LEAVITT, SANF PO BOX 696 N ELK GROVE IL SD HAMMER, JOE PO BOX 696 N	gations of, Section 6 is of registerial agricultural in OFFICERS AND DI FORD IA	GO7.0505, Florida Statuli GOT.0505, Florida Statuli GRECTORS DELETE DELETE DELETE DELETE	Ites, the above ized by the corps. 13. 1 1 TITLE 12 NAME 13 STREE 24 CITY- 2 1 TITLE 32 NAME 33 STREE 44 CITY- 51 TITLE 52 NAME 43 STREE 54 CITY- 61 TITLE 62 NAME	et Address st-zip It Address St-zip It Address St-zip It Address St-zip It Address St-zip	and or directors. Thereby accept the app	DATE DATE FICERS AND DIRECT Change Change	registered of d agent. I am on the desired of desired agent. I am on the desired agent. I am on the desired agent. I am on the desired agent age
D. Pursuant or register familiar will GNATURE. L. F. ME. HET AUDRESS Y-ST-ZIP LE ME HET AUDRESS Y-ST-	PD LEAVITT, SANF PO BOX 696 N ELK GROVE IL SD HAMMER, JOE PO BOX 696 N	gations of, Section 6 is of registerial agricultural in OFFICERS AND DI FORD IA	GO7.0505, Florida Statuli GOT.0505, Florida Statuli GRECTORS DELETE DELETE DELETE DELETE	Ites, the above ized by the corps. 13. 1 1 TITLE 12 NAME 13 STREE 24 CITY- 2 1 TITLE 32 NAME 33 STREE 44 CITY- 51 TITLE 52 NAME 43 STREE 54 CITY- 61 TITLE 62 NAME	et Address st-zip taddress st-zip taddress st-zip taddress st-zip taddress st-zip taddress st-zip	and or directors. Thereby accept the app	DATE DATE FICERS AND DIRECT Change Change	registered offid agent. I am ORS IN 12