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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P36600** (5)

1. Corporation Name

NICOLAS VILLALBA WHOLESALERS, INC.



Principal Place of Business

**3501 NW 46TH STREET
MIAMI FL 33142**

Mailing Address

**3501 NW 46TH STREET
MIAMI FL 33142**

3. Date Incorporated or Qualified
12/05/1991

3a. Date of Last Report
04/28/1995

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**HARRIS, ELLIOTT, ESQ.
111 SW 3RD ST., SIXTH FLOOR
MIAMI FL 33130**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature typed or printed name of registered agent and the corporation)

(If 11b Registered Agent Signature required, attach separately)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CDP	☐ DELETE
NAME	VILLALBA, NICOLAS	
STREET ADDRESS	3501 NW 46TH STREET	
CITY- ST- ZIP	MIAMI FL	
TITLE	SD	☐ DELETE
NAME	VILLALBA, NEREIDA	
STREET ADDRESS	3501 NW 46TH STREET	
CITY- ST- ZIP	MIAMI FL	
TITLE	AS	☐ DELETE
NAME	HARRIS, ELLIOTT	
STREET ADDRESS	111 SW 3 ST., SIXTH FL	
CITY- ST- ZIP	MIAMI FL	
TITLE	VP	☐ DELETE
NAME	VILLALBA, NICOLAS JR.	
STREET ADDRESS	3501 NW 46TH ST	
CITY- ST- ZIP	MIAMI FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Nicolas Villalba (Seery)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-96

305 638-4550

CR2E034 (12/95)