## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** P92000001848 (0)

**FILED** Feb 05 1998 8:00am Secretary of State

B&R	DISTRIBUTING, INC.					] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [
Principal Plac	e of Business	Mailing Address			- E IDDAIDDI AID IDAID AIDAI ODAIA OTAA ODAA	F 80101 91009 18111 81801 1811 1801
1501 S 22 AVENUE HOLLYWOOD FL 33020 US		1501 S 22 AVENUE HOLLYWOOD FL 33020 US		DO NOT WRITE IN TH	IIS SPACE	
					<ol> <li>Date Incorporated or Qualified</li> <li>11/03/1992</li> </ol>	
2. Principal P	face of Business	2a, Mailing Address			4. FEI Number	Applied For
21		26	26		65-0377925	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	h		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State	City & State			Fee Required
23			28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country		8. This corporation owes or has paid the	
24	25		30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	<del></del>	221		10. Name and Address of New Register	ed Agent
	PROPORATION INFORMATION SE	ERVICES INC.	81 Na	me		
	01 HAYS STREET		<b>82</b> Str	eet Addre	ess (P.O. Box Number is Not Acceptable)	
IA	LLAHASSEE FL 32301		83			
						*****
•			84 Cit	У	F	85 Zip Code
SIGNATURE			s, the above-nar uthorized by the rida Statutes.  Registered Agent sign		oration submits this statement for the purposon's board of directors. I hereby accept the	
12.	Signature typed or printed name of registered ap OFFICERS AN	ID DIRECTORS	13.	nature requires	ADDITIONS/CHANGES TO OFFICERS	
TITLE	P	DELETE	1.1 TITLE		TIDDITIONO, OF THE TIDE NO.	Change Addition
NAME	MASSEY, RAYMOND		1.2 NAME			
STREET ADDRESS	1501 S 22ND AVE		1.3 STREET ADDR	ESS		
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CITY - ST - ZIP			
TITLE	BAKER, LEONARD P	☐ DELETE	2.1 TITLE			Change Addition
NAME	1501 \$ 22ND AVE		2.2 NAME	cec		
STREET ADDRESS CITY-ST-ZIP	HOLLYWOOD FL		2.3 STREET ADDR 2.4 CITY - ST-ZIP	1		
TITLE	DELETE		3.1 TITLE			Change Addition
NAME	328		3.2 NAME			
STREET ADDRESS	333		3.3 STREET ADDR	ESS		
CITY-ST-ZIP	3.4		3.4. CITY-ST-ZIP			
TITLE			4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDR	čSS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDR	ESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE	<del></del>	☐ DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDR	ESS		
CITY-ST-ZIP	partify that the information symplical	with this filing does not qualify for	6.4 CITY-ST-ZIP	etated in C	Section 119.07(3)(i). Florida Statutes. I (urthe	r certify that the information

Indicated on this annual report or supplied with this him globes not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further certify that the information indicated on this annual report or supplemental panual 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 trusted 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 attackment with an address.