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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P93000065855 (7)

ASSOCIATED DISTRIBUTORS OF SOUTH FLORIDA, INC.

FILED Jun 03 1997 8:00am Secretary of State



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Principal Plac		Mailing Address			The state of the s		
2324 HOLLYWOOD BLVD. HOLLYWOOD FL 33020		2324 HOLLYWOOD BLVD. HOLLYWOOD FL 33020-6703					
					3. Date Incorporated or Qualified 09/15/1993	3a. Date of Last Report 04/29/1996	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied for	
21		26		65-0438339	Not Applicabl		
Suite, Apt #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Stat		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
. Zip	Country	Zφ *** 1	Count	У	8. This corporation has liability for in		
24	25 9. Name and Address of Current	29	30		Florida Statutes 10. Name and Address of New Reg	Yes No	
DEIA		i Hegistered Agent	8	I Name	10. Name and Address of New Heg	istered Agent	
	ier, samuel b II Brickell ave.		ľ	1			
	E 1901		6:	Street Add	ress (P.O. Box Number is Not Acceptab		
	WI FL 33131		8:			<u>*</u> :	
MIN	AILE 22121		["	1			
			84	City		FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607 0502	2 and 607 1508 Florida Statu	tes the above	L named con	noration submits this statement for the m		
office or r agent. I a SIGNATURE	ogistøred agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was itions of, Section 607.0505, Fl	authorized t orida Statute	by the corporal	poration submits this statement for the pi dion's board of directors. Thereby accep	I the appointment as registered	
SIGNATORIC	Signature: typed or printed name of registered ager	it and title 1 applicable (NO)	H - Bogistered A	gent Biguature requi	ired when reinstating)	DATI	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	D DOWNSON WALTED	DELETE	1.1 TOTLE			Change Additio	
NAME	DICKINSON, WALTER		1.2 NAME				
STREET ADDRESS	2324 HOLLYWOOD BLVD.		1.3 STREE	I ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL 33020	D St. File	1.4 CITY-	ST-2IP			
TITLE	DIOMINICON THORIE	☐ DELETE	2.1 TITLE			☐ Change ☐ Additio	
NAME	DICKINSON, LUCILLE 2324 HOLLYWOOD BLVD.		2.2 NAME				
STREET ADDRESS	HOLLYWOOD FL 33020			1 ADDRESS			
CITY-ST-ZIP	D 1000 11 33020	DELFTE	2 4 Cfty	·\$1 - 71P		Change Addition	
2 * *	DICKINSON, WALTER C	[] territe	31 1JT(F			ChangeAddxto	
NAME STREET ADDRESS	2324 HOLLYWOOD BLVD.		3.2 NAM(1 Approace			
3.4	HOLLYWOOD FL 33020			1 ADDRESS			
CITY-ST-ZIP TITLE	D	DELETE	3.4. CHY 4.1 TITLE	S1-7P		Change Addition	
NAME	ZIBMAN, HENRY	Z. Delle II.	4 2 NAM			Change Notation	
STREET ADDRESS	2324 HOLLYWOOD BLVD.		1	I ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL 33020						
TITLE		DELETE	4.4 SHY- 5.1 TOLE	51-20		Change Addition	
NAME			5.2 NAME				
STREET ADDRESS				I ADDRESS			
CITY-ST-ZIP			5.4 C/TY-	ĺ			
TITLE		☐ DELFTE	61 THLE			Change Addition	
NAME			6.2 NAME)		•	
STREET ADDRESS			6.3 \$1REE	1 ADDRESS			
CITY ST-ZIP			6 4 CITY-	- 1			
44 Lefa basa	and the state of the formation of the state	C. (4) 4) 1- 49	C. Consider a		1. O- 1. 440 07(0)(1) 51 3-1. O- 4.	The state of the s	

The included on this annual report or supplemental annual report is true and that my signature shall have the same logal 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 13 if changed, or on an attachment with my address.

10. 1. 6-10.99 961 227-024