

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000072859 (0)

1. Corporation Name

IVY DISTRIBUTORS, INC.



Principal Place of Business

5501 NW 36TH AVE
MIAMI FL 33142

Mailing Address

5501 NW 36TH AVE
MIAMI FL 33142

2. Principal Place of Business

21 3750 NW 28th St, #111

Suite, Apt. #, etc.

22 #111

City & State

23 Miami, FL

Zip

24 33142

Country

25 USA

2a. Mailing Address

26 3750 NW 28th St, #111

Suite, Apt. #, etc.

27 #111

City & State

28 Miami, FL

Zip

29 33142

Country

30 USA

9. Name and Address of Current Registered Agent

HEIMAN, TIMOTHY M
13020 SW 92ND AVE
UNIT A-110
MIAMI FL 33176

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

Timothy M. Heiman President

4/09/96

12. OFFICERS AND DIRECTORS

TITLE DP
NAME HEIMAN, TIMOTHY
STREET ADDRESS 13020 SW 92 AVE., UNIT A-110
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE S
NAME HEIMAN, JAMES F.
STREET ADDRESS 4520 SW 62ND ST
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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☐ DELETE

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

2. TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

3. TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

4. TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

5. TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

6. TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 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 or person empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, as changed, or on an attachment with an address.

SIGNATURE:

Timothy M. Heiman President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/09/96 (305) 635-6901

(Date)

(Telephone Number)

CR2E034 (12/95)