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

Mailing Address 3750 NW 28TH ST

MIAM FL 33142

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000072859 (0)

IVY DISTRIBUTORS, INC.

Principal Place of Business

MIMU FI 33142

FILED Mar 05 1998 8:00am Secretary of State

	DO NOT WRITE IN THIS SPACE					
	3. Date Incorporated or Qualified 10/20/1993					
	4. FEI Number	Applied For				
ж	65-0448357	Not Applicable				
		\$8.75 Additional				

ye ye		3. Date Incorporated or Qualified					
				10/20/1993			
	lace of Business 2a. Mailing Address	LI a.	0	4. FEI Number	Applied For		
21 8600	TY SUVI I	South Ri	sa prive	65-0448357	Not Applicable		
Suite, Apt.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State City & State			6. Election Campaign Financing	\$5.00 May Be			
and Medien Fl				Trust Fund Contribution	Added to Fees		
Zip 33 6 6 25 US A 29 33 6 6 30 US			}	8. This corporation owes or has paid the curre Personal Property Tax due June 30.	ent year Intangible Yes 🔲 No		
• • • • • • • • • • • • • • • • • • • •	9. Name and Address of Current Registered Agent	10. Name and Address of New Registered A	gent				
HE	IMAN, TIMOTHY M						
40000 CHI DOND AVE							
13020 SW 92ND AVE UNIT A-110			82 Street Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 33176			83				
		84 (City	FL.	85 Zip Code		
11 Durament	to the provinces of Sections 607 0502 and 607 1508 Florida Statutes	the above o	amad coroo		hanging its registered		
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 agont, 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 familier with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE Stgnature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE							
12.	OFFICERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12		
TITLE	DP DELETE	1.1 TITLE			Change Addition		
NAME	HEIMAN, TIMOTHY	1.2 NAME					
STREET ADDRESS	13020 SW 92 AVE., UNIT A-110	1.3 STREET AD	DRESS				
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-Z			i		
TITLE	S DELETE	2.1 TITLE	<u>"</u>		Change Addition		
NAME	HEIMAN, JAMES F.	2.2 NAME		•			
	4520 SW 62ND ST		noree				
STREET ADDRESS	MIAMI FL	2.3 STREET ADD					
CITY-ST-ZIP	DELETE DELETE	2.4 CITY-ST-2	ZIP		Change Addition		
TITLE	Ŭ veccie	3.1 TITLE		ľ	T Allerings The Manufact		
NAME		3.2 NAME					
STREET ADORESS		3.3 STREET ADD					
CITY-ST-ZIP TITLE	DELETE	3.4. CITY-ST-2	(#r		Change Addition		
	in other				condo nonton		
NAME		4. 2 NAME					
STREET ADORESS		4.3 STREET ADD					
CITY-ST-ZIP	Louere	4.4 CITY-ST-Z)P		Change Addition		
TITLE	DELETE	5.1 TITLE		ι	Change Addition		
NAME	,	5.2 NAME					
STREET ADDRESS	,	5.3 STREET ADD	1				
CITY-ST-ZIP		54 CITY-ST-Z	P				
TITLE	DELETE	6.1 TITLE		7000024491 -03/06/980104400	Change		
NAME		6.2 NAME			اری0ی ا		
STREET ADDRESS		63 STREET ADI	DRESS	***150.00	¹⁶ QE, ∠		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 changes, or of in attachment with an address.

SIGNATURE: - WITH ME --

(305) 807-212

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