

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000074490

FILED
May 06, 2004
Secretary of State

Entity Name: UNION DISTRIBUTORS OF U.S.A., INC.

Current Principal Place of Business:

7166 N.W. 50TH STREET #B
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

7166 N.W. 50TH STREET #B
MIAMI, FL 33166

New Mailing Address:

FEI Number: 65-0445622 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALFONSO, ABEL
14273 S.W. 24TH ST.
MIAMI, FL 33175 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: AROCHA, FIDEL E
Address: 3882 S.W. 89TH AVE.
City-St-Zip: MIAMI, FL 33165

Title: VP () Delete
Name: GONZALEZ, LINDA L
Address: 3882 S.W. 89TH AVE.
City-St-Zip: MIAMI, FL 33165

Title: V () Delete
Name: ALFONSO, ABEL
Address: 7166 N.W. 50TH STREET, WAREHOUSE B
City-St-Zip: MIAMI, FL 33166

Title: PCEO () Delete
Name: AROCHA, EDEL
Address: 7166 N.W. 50TH STREET, WAREHOUSE B
City-St-Zip: MIAMI, FL 33166

Title: VP () Delete
Name: AROCHA, RENE
Address: 14273 SW 24 ST
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: AROCHA, FIDEL E
Address: 1103 SW 145TH AVE.
City-St-Zip: MIAMI, FL 33184

Title: VP (X) Change () Addition
Name: GONZALEZ, LINDA L
Address: 1103 SW 145TH AVENUE
City-St-Zip: MIAMI, FL 33184

Title: VP (X) Change () Addition
Name: ALFONSO, ABEL
Address: 14273 SW 24 ST
City-St-Zip: MIAMI, FL 33175

Title: CFO (X) Change () Addition
Name: HOLTZ, RYAN
Address: 3882 SW 89TH AVE
City-St-Zip: MIAMI, FL 33165

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FIDEL E. AROCHA

Electronic Signature of Signing Officer or Director

PCEO

05/06/2004

Date