FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

ANNUAL REPORT

1995

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 AM 10: 17

DOCUMENT # P93000077591 (4)

1. Corporate Name

M & H WAREHOUSING AND DISTRIBUTION, INC.

Principal Place of Business

5201-1 W 1ST STREET
JACKSONVILLE FL 32254

Mailing Address

5201-1 W 1ST STREET
JACKSONVILLE FL 32254

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/01/1994

3a. Date of Last Report

2. Principal Business

21

2a. Mailing Address

26

4. FEI Number: 59-3217010 — Applied For / Not Applicable

Suite, Apt. #

22

Suite, Apt. #

27

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

City & State

23

City & State

28

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

24 25 29 30

8. The corporation has liability for intangible tax under § 199.032, Florida Statutes: ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

TRUMAN, DUANE
5201-1 W 1ST STREET
JACKSONVILLE FL 32254

10. Name and Address of New Registered Agent

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 Section 607.0505 of the 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

12. OFFICERS AND DIRECTORS

PRESIDENT
DUANE TRUMAN
5201-1 W 1ST ST
JAX, FL 32254

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS

☐ Change ☐ Addition

REMITTED BY MAY 1

14. I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a director or officer 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 attached amendment, or on other legal documents on file with this office.

SIGNATURE: Duane Truman — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/95 — Date

904-781-9124 — Daytime Phone Number

0407790 FP