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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT #

P94000012901 (2)

VENEGAS DISTRIBUTORS CORP.

FILED Jan 16 1998 8:00am Secretary of State

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Personal Property Tax due June 30 Yes No Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent			28 Fratean,	¥ /C	DRA CYC			
11. Pursuant to the provisions of Soctions 607 0002 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familier with, and accept the obligations of Soctions 607 0002 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familier with, and accept the obligations of Soction 607 0005. Florida Statutes. SIGNATURE Signature. Specific or pregistered agent. I am familier of registered agent. I am familier with, and accept the obligations of Soction 607 0005. Florida Statutes. SIGNATURE Signature. Specific or pregistered agent. I am familier of registered agent. I am familier of vite. Pregistered agent agent are required when remarking. DELETE OF I CERS AND DIRE CTORS 12. OF I CERS AND DIRE CTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 11. III. PUNA, NORAIDA 12. NAME LUNA, NORAIDA 12. NAME LUNA, NORAIDA 12. NAME LUNA, CESAR 22. INMI SIRET ADDRESS CITY-S1-ZP HIALEAH FL 33010 13. SHEEL ADDRESS CITY-S1-ZP HIALEAH FL 33010 24. CITY-S1-ZP HIALEAH FL 33010 24. CITY-S1-ZP HIALEAH FL 33010 24. CITY-S1-ZP 17. LUNA SIRET ADDRESS CITY-S1-ZP 17. LUNA SIRET ADDRESS CITY-S1-ZP Addition NAME SIRET ADDRESS SI	Zip ス な() /	Country	- 700,3010		125 a			· _
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228 E. 20 STREET HIALEAH FL 33010 11. Pursuant to the provisions of Sections 607-0502 and 607-1508. Florida Statules, 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 Sub-change was authorized by the corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607-6505, Florida Statules. SIGNATURE SIGNATURE 12. Of FICERS AND DIRECTORS OF FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ITILE P			Haftistalan Watti		Name	TU, INDITE BITO AUDITES OF NEW P	iodistaten Wäbur	
HALEAH FL 33010 83	LUNA, NURAIDA							
Signature Provisions of Sections 607.0502 and 607.1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its 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 agent					Street Addre	ess (P,O. Box Number is Not Accepti	able)	İ
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered egent, or both, in the State of Forda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent are internitient with, and accept the obligations of, Section 607 0505, Florida Statules. SIGNATURE Signature. Specific or purised name of registered agent and filter registerable. (NOTE Registered Agent agenture required when remastering). DATE 12. Of FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE P	•••			8	13			
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered egent, or both, in the State of Forda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent are internitient with, and accept the obligations of, Section 607 0505, Florida Statules. SIGNATURE Signature. Specific or purised name of registered agent and filter registerable. (NOTE Registered Agent agenture required when remastering). DATE 12. Of FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE P				-	MA City		loE	Zip Codo
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Signature Signature, typed or period granted agent and fill of applicable (NOTE Registered Agent signature required when reinstaling) DATE	office or re	egistered agent, or both, in the State of	of Florida. Such change was a	uthorized.	by the corporati	oration submits this statement for the on's board of directors. I hereby acc	purpose of chang ept the appointment	ing its registered nt as registered
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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 eath; that I am an officer or director of the corporation or the receiver or fusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.