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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000092985 (8)

1. Corporation Name
S & R PURCHASING SERVICE, INC.



Principal Place of Business

1235 NW 103 RD ST
MIAMI FL 33147
US

Mailing Address

1235 NW 103 ST
MIAMI FL 33147-1425
US

2. Principal Place of Business

21 1905 N.W. 115th
Suite, Apt. #, etc.

22

23 City & State
Miami, FL

24 Zip
33167

25 Country
USA

2a. Mailing Address

26 1905 N.W. 115th
Suite, Apt. #, etc.

27

28 City & State
Miami, FL

29 Zip
33167

30 Country
USA

3. Date Incorporated or Qualified
12/22/1994

3a. Date of Last Report
06/11/1996

4. FEI Number
65-0543879

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MACK, J D
1200 NW 95TH STREET
MIAMI FL 33147

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 300002222653-9
-07/08/97-01041-024

84 City
****165.00 FL ****165.00

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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent Signature required when reinstating)

4/25/97

12. OFFICERS AND DIRECTORS

TITLE SD
NAME ROSS, LEONARD
STREET ADDRESS 14851 GARDEN DRIVE
CITY-ST-ZIP MIAMI FL 33168 X DELETE

TITLE PD
NAME SARDINE, BRIAN
STREET ADDRESS 1905 NW 115 ST
CITY-ST-ZIP MIAMI FL X DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP X DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP X DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP X DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP X DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 changed, or on an attachment with an address.

SIGNATURE: Brian Sardine

4/25/97(305) 953-97

CR2E034 (9/96)