

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000055673

**FILED**  
**Feb 11, 2012**  
**Secretary of State**

**Entity Name:** INDUSTRY DISTRIBUTION, INC.

**Current Principal Place of Business:**

1011 6TH AVE. SOUTH  
REAR  
LAKE WORTH, FL 33460 US

**New Principal Place of Business:**

**Current Mailing Address:**

1011 6TH AVE. SOUTH  
REAR  
LAKE WORTH, FL 33460 US

**New Mailing Address:**

**FEI Number:** 65-0615863      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

OLSSON, JORMA  
1011 6TH AVE. SOUTH  
LAKE WORTH, FL 33460 US

**Name and Address of New Registered Agent:**

OLSSON, JORMA  
1011 6TH AVE. SOUTH  
REAR  
LAKE WORTH, FL 33460 US

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

02/11/2012

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: OLSSON, JORMA  
Address: 1011 6TH AVENUE SOUTH  
City-St-Zip: LAKE WORTH, FL 33460

Title: TREA  
Name: OLSSON, PAIVI  
Address: 1011 6TH AVENUE SOUTH  
City-St-Zip: LAKE WORTH, FL 33460 US

I hereby 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 all other like empowered.

SIGNATURE: JORMA OLSSON

Electronic Signature of Signing Officer or Director

PRES

02/11/2012

Date