

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P95000086066 (4)

1. Corporation Name

DBC DISTRIBUTING OF EAST ORLANDO, INC.

Principal Place of Business

5733 FIVE FLAGS BLVD. #2033  
ORLANDO FL 32822

Mailing Address

5733 FIVE FLAGS BLVD. #2033  
ORLANDO FL 32822

APPROVED  
AND  
FILED

97 JUL 23 PM 2:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/08/1995	3a. Date of Last Report 05/01/1996
4. FEI Number 59-3345113	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

ECHEVARRIA, ALBERT  
5733 FIVE FLAGS BLVD. #2033  
ORLANDO FL 32822

10. Name and Address of New Registered Agent

81 Name  
ECHEVARRIA, ALBERT  
82 Street Address (P.O. Box Number is Not Acceptable)  
5741 FIVE FLAGS BLVD #2043  
83  
84 City  
ORLANDO  
85 Zip Code  
FL 32822

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 *Albert Echevarria*  
Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

7-18-97  
DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P  
ECHEVARRIA, ALBERT  
5733 FIVE FLAGS BLVD. #2033  
ORLANDO FL 32822

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
000002250550--T  
-07/29/97--01060--017  
\*\*\*\*165.00 \*\*\*\*165.00  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
PRESIDENT  
ECHEVARRIA, ALBERT  
5741 FIVE FLAGS BLVD #2043  
ORLANDO, FL 32822  
☐ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET  
2.4 CITY-ST  
☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET  
3.4 CITY-ST  
☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET  
4.4 CITY-ST  
☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET  
5.4 CITY-ST  
☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET  
6.4 CITY-ST  
☐ Change ☐ Addition

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 *Albert Echevarria*

CR2E034 (4/97)