2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Jul 31, 2007 8:00 am Secrétary of State DOCUMENT #P95000086665 07-31-2007 90007 028 ***158.75 C N C DISTRIBUTORS, INC. Principal Place of Business Mailing Address 18801 NW 2ND ST 19451 SHERIDAN ST PEMBROKE PINES FL 33029 PEMBROKE PINES FL 33332 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 2nd MOORE CR2E034 (4/07) 4. FE! Number Applied For City & State City & State 65-0624870 Not Apolicable Country Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CAGAN, ANNETTE Street Address (P.O. Box Number is Not Acceptable) 3524 N.W. 10TH AVE. OAKLAND PARK FL 33309 18801-NW 2ST 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature reduired when reinstating) FILE NOW!!! FEE IS \$550.00 S 607 193(2)(b), F.S., allows for the waiver of the \$400.00 \$5.00 May Be 9. Election Campaign Financing DUE BY September 5, 2007 late fee. By checking this box, the corporation certifies it Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State did not receive prior notice. Fee to file is \$150.00. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. mile PST ☐ Detete ☐ Change Addition 🔲 CAGAN, ANNETTE NAME 18801 NW 2ND ST STREET ADDRESS STREET ADDRESS PEMBROKE PINES FL 33029 CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIE ☐ Delete TITLE Change Addition MAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CHY-ST-ZIP ☐ Delete ☐ Change ☐ Addition HILE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Channe Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further 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 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 10 or Block 11 if

FILED



To whom It May Concer. Two weeks ago I received a post land, and mailed it Back. I do not Law a Computor. I received my annual report a few days ago I went to write the check and was slocked by the \$50.00 fee. I called and spoke to a Customer pervise representative, and he told me it was due may 1, and I was sent a Cord in January. I never received it. The card was mailed to my P.O. Bof in the UPS store. It was probably placed in the wary box and the person it is it out I love never been late with any bills. If you look back over the Last 12 years I paid prosptly . Your up esentations told me to send 150,00 with a little. I will be very grotefull if you can wave the Late fee. If not let me no and I Will mail the bolance.

> Sincerily Annetts Cog an