## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State **FILED** 

Apr 29 1997 8:00am

Secretary of State

3a, Date of Last Report

Applied For

Not Applicable

\$8.75 Additional

3. Date Incorporated or Qualified

5. Certificate of Status Desired

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P96000609319

Grand Central Distributors, Inc.

Principal Place of Business

2. Principal Place of Business

SAME

Mailing Address

28. Mailing Address 26. **SAME** 

2143 W. Fairbanks Ave. Winter Park, FL 32789

City & State	City & State		B. Election Occupation Ciarration	86.00		1
3 SAME	28 SAME		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added to		
Zip Country <b>25</b>	Zip Country 30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
9. Name and Address of Current	Registered Agent		10. Name and Address of New	Registered Agent		
Constable Agrest	7)	81 Name	SAMe			}
Constable Agresta 2143 W. Fairbanks Ave		82 Street Add				{
2143 W. Fairbanks	AVR		SAME			
MONTAL DIKK EI	83	same			}	
Winter Park, FL 32789		84 City	<u> </u>	- 85 Zip C	Code	1
			SAME-	FL   T	<del></del>	1
1. Pursuant to the provisions of Sections 607.05 pt. office or registered agent for both, in the diate of	and 607.1508. Florida Statutes, t f Florida. <b>S</b> uch change was autho	he above-named cor orized by the corpora	poration submits this statement for that took to be action's board of directors. I hereby action's	e purpose of changing its cept the appointment as:	s registered realstered	}
agent. I amy amilial with, and accept the obligati	ens of, Section 607.0505, Florida	Statutes.	ŕ	, , , ,	Ü	
SIGNATURE KINT &	and title if any liceable (NOTE: Rec	gistered Agent signature requ	ured when exinctorno)	DATE		1
12. OF FICERS AND		13.	ADDITIONS/CHANGES TO OF		S IN 12	Ø
Desident	DELETE	1.1 TITLE		Change	Addition	96/6)
HAME COnstable Agrest	a, i	1.2 NAME				Ä
Constable Agrest	s Ave	1.3 STREET ADDRESS				B
OHY-SIZE WINTER PORK FL	32789	1.4 CITY-ST-ZIP				CR2E034
THILE	DELETE	2 1 TITLE		Change	Addition	ျပ
NAME	<u>,                                    </u>	2 2 NAME				}
STREET ADDRESS	•	2.3 STREET ADDRESS				
City St Ze	DELETE	2. 4 CITY-ST-ZIP		Change	Addition	-
TO LE NOM	F) bestir	32 NAME		[_] Origings		
STREET ADJ. 45%		3 3 STREET ADDRESS				
City St 24	4	3 4. CHY-ST-ZIP				
tit.t	DELETE	4.1 THLE		☐ Change	☐ Addition	1
NAM		4 2 NAME				
STR/F1 ADDRESS		4.3 STREET ADDRESS				
( N · St 70°		4.4 CiTY - ST - ZIP			114.00	
707.7	DELETE	5 1 TITLE		☐ Change	Addition	}
HAMI		5.2 NAME			), <sub>(V</sub> )	
STREET ALUMINE	į.	5 3 STREET ADDRESS		$\mathcal{C}$	17/4 -	
(4) × 5 - 70   Tu   F	DELETE	54 CITY-ST-ZIP 61 TITLE			L Addition	1
LAM )	,	6 2 NAME	6000021	63326		1
S180 F ( 420 R c & )		6.3 STREET ADDRESS	6000021 -05/02/9701 ***165.00	102042		1
File St. 20		64 CITY-ST-ZIP	**************************************			}
14. Lide hereby certify that the information applied information indicated on this annual leportor sulfarman officer or director of the perpendicular appears in Block 12 in block 13 in changed, or	with the filing does not qualify to polorimental annual exfort is true in receiver or tusted empowered in an attachment of an agores	the exemption state and accurate and the dito execute this rep- s.	ed in Section 119.07(3)(i), Fiorida Stat at my signature shall have the same le ort as required by Chapter 607, Florid	utes. I further certify that egal effect as if made und a Statules; and that my n	the der cath; that lame	]
SIGNATURE:	DENIZED NAME OF SCHOOL OF	NIDECTOR	7-17-11	99 4-08	8/	