Mar 08, 1999 8:00 am Secretary of State

03-08-1999 90044 050 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9600009319

1. Corporation Name

GRAND CENTRAL DISTRIBUTORS, INC.

Principal Place	of Business	Mailing Address				
670 CHERRY ST 670 CHERRY ST						*1
WINTER PARK FL 32789 WINTER PARK FL 32789					DO NOT WRITE IN THIS S	SPACE '
US US					3. Date Incorporated or Qualifed	# 110E
					01/30/1996	
Principal Pt	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21 26					59-3356706	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional
27						Fee Required
City & State	9	City & State			6. Election Campaign Financing	\$5.00 May Be Added to Fees
23		28	Countr		Trust Fund Contribution	
Zip	Country	Zip	—	y	This corporation owes the current year Inta Personal Property Tax.	ngible ∐Yes M∑No
24	25		30		10. Name and Address of New Registered A	
-	9. Name and Address of Curren	t Registered Agent	81	Name	10. Hame and Address of New Adgistered A	90
AGR	ESTA, CONSTABLE					
670 CHERRY SY				Street Add	dress (P.O. Box Number is Not Acceptable)	
	TER PARK FL 32789		83	-		
*****	2117/11/11/2 02/00		0.5	' †		
			84	City	FL	85 Zip Code
				<u> </u>		hanging its registered
11. Pursuant	to the provisions of Sections 607.050 egistered agent, or both, in the State	2 and 607.1508, Florida Statute of Florida. Such change was au	s, the abov thorized by	/e-named cor / the corpora:	rporation submits this statement for the purpose of c tion's board of directors. I hereby accept the appoin	manging its registered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Flori	da Statute	s.	•	
SIGNATURE			_		ured when reinstating) DATE	
	Signature, typed or printed name of registered ager			ent signature requi	ADDITIONS/CHANGES TO OFFICERS ANI	DIPECTORS IN 12
12.	P	D DIRECTORS DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND	☐ Change ☐ Addition
TITLE	'	A perceie	1.2 NAME			
NAME	AGRESTA, CONSTABLE 6000 PARK VIEW POINT			TADDRECC		
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32821	☐ DELETE	1.4 CITY-1	ST-ZIP	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ Change ☐ Addition
TITLE	PRESIDENT -					Denerâte Diversion
NAME	CONSTABLE AGRESTA		2.2 NAME			ļ
STREET ADDRESS	REET ADDRESS 670 CHERRY STREET			TADORESS	,	
CITY-ST-ZIP	WINTER PARK, FL	32789 DELETE	2. 4 CITY-	ST-ZIP		☐ Change ☐ Addition
TITLE	,	DELETE	3.1 TITLE			
NAME			3.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP		□ DELETE	3.4. CITY-	ST-ZIP		☐ Change ☐ Addition
TITLE		☐ DELETE	4.1 TITLE			C origings C Addition
NAME			4. 2 NAME	i		
STREET ADDRESS			4.3 STREE	TADORESS		
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		Change Daddition
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			5.4 CITY-	ST-ZIP		
τπιε		☐ DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREI	ET ADDRESS		

14. 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: