

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

PROFIT CORPORATION ANNUAL REPORT 1997



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

FILED
May 19 1997 8:00am
Secretary of State

DOCUMENT # P96000035001 (2)
 1. Corporation Name
DISTRIBUTION & TRADE SERVICES, INC.



Principal Place of Business
**720 CORAL WAY
 APT. B12
 CORAL GABLES FL 33134**

Mailing Address
**720 CORAL WAY
 APT. B12
 CORAL GABLES FL 33134-4878**

2. Principal Place of Business

21 **2920 NW 109 Ave**
 State, Apt. #, etc.
 22 **Miami, FL**
 City & State
 23 **Miami**
 City
 24 **FL 33172**
 State

2a. Mailing Address

26 **2920 NW 109 Ave**
 State, Apt. #, etc.
 27 **Miami, FL**
 City & State
 28 **Miami**
 City
 29 **33172**
 State

9. Name and Address of Current Registered Agent

**ROJAS, ANA M
 9500 SOUTH DADELAND BLVD.
 SUITE 705
 MIAMI FL 33156**

3. Date Incorporated or Qualified
04/22/1996

3a. Date of Last Report

4. FEI Number

65-0447122

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 190.002, Florida Statutes.

Yes No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0409 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to registered agent or both in the State of Florida. Such change was and is 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 607.0409, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS

| | | |
|----------------|-------------------------------|----------------------------------|
| TITLE | PD | <input type="checkbox"/> DELETED |
| NAME | TAUNTON, THOMAS | |
| STREET ADDRESS | 720 CORAL WAY APT. B12 | |
| CITY-STATE-ZIP | CORAL GABLES FL 33134 | |
| TITLE | STD | <input type="checkbox"/> DELETED |
| NAME | TAUNTON, WILLIAM | |
| STREET ADDRESS | 720 CORAL WAY APT. B12 | |
| CITY-STATE-ZIP | CORAL GABLES FL 33134 | |
| TITLE | | <input type="checkbox"/> DELETED |
| NAME | | |
| STREET ADDRESS | | |
| CITY-STATE-ZIP | | |
| TITLE | | <input type="checkbox"/> DELETED |
| NAME | | |
| STREET ADDRESS | | |
| CITY-STATE-ZIP | | |
| TITLE | | <input type="checkbox"/> DELETED |
| NAME | | |
| STREET ADDRESS | | |
| CITY-STATE-ZIP | | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | |
|-------------------|--|
| 11 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12 NAME | |
| 13 STREET ADDRESS | 2920 NW 109 Ave |
| 14 CITY-STATE-ZIP | Miami, FL 33172 |
| 15 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 16 NAME | 2920 NW 109 Ave |
| 17 STREET ADDRESS | Miami, FL 33172 |
| 18 CITY-STATE-ZIP | 33172 |
| 19 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 20 NAME | |
| 21 STREET ADDRESS | |
| 22 CITY-STATE-ZIP | |
| 23 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 24 NAME | |
| 25 STREET ADDRESS | |
| 26 CITY-STATE-ZIP | |
| 27 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 28 NAME | |
| 29 STREET ADDRESS | |
| 30 CITY-STATE-ZIP | |

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 190.02(3)(b) Florida Statutes. I further certify that the information provided 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 empowers me to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or any attachment thereto with an address.

CR2E034 (9/95)