## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000063071

City-St-Zip:

FILED Feb 07, 2004 Secretary of State

Entity Nar	ne: GENERI	C DISTRIBUTORS CORPORAT	TON				
Current P	rincipal Place	e of Business:	New Principal Place of Business:				
13961 SW MIAMI, FL							
Current Mailing Address:			New Mailing Address:				
13961 SW MIAMI, FL							
FEI Number:	65-0687781	FEI Number Applied For()	FEI Number Not Appl	icable ( ) Certi	ficate of Status Des	ired()	
Name and	Address of C	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
	), MAIDA E JTHWEST 109 33186 US	9TH STREET					
	named entity e of Florida.	submits this statement for the p	urpose of changing i	ts registered office of	or registered ager	ıt, or both,	
SIGNATUR							
Election Car		nic Signature of Registered Age g Trust Fund Contribution ( ).	nt		Date		
	S AND DIREC	-	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title:	D (	) Delete	Title:	P/D (X) Chang	ge ( ) Addition		
Name:	CHAVECO, MA		Name:	CHAVECO, MAIDA E			
Address:		WEST 109TH STREET	Address:	13961 SOUTHWEST	109TH STREET		
City-St-Zip:	MIAMI, FL 331	60	City-St-Zip:	MIAMI, FL 33186			
Title:	(	) Delete	Title:		ge (X) Addition		
Name:			Name:	BARILLAS, GERARDO			
Address: City-St-Zip:			Address: City-St-Zip:	13961 S.W. 109 STRE MIAMI, FL 33186	<u>:</u> E1		
Title:	,	) Delete	Title:	S ()Chang	ge (X) Addition		
Name:	(	) Delete	Name:	HERRERA, DAIMA B	je (X) Addition		
Address:			Address:	11369 N.W. 7TH STRI	EET # 203		
City-St-Zip:			City-St-Zip:	MIAMI, FF 33186			
Title:	(	) Delete	Title:	T () Chang	ge (X) Addition		
Name:			Name:	BONACHEA, GRETA			
Address:			Address:	8000 S.W. 149 AVENI	JE # A102		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

MIAMI, FL 33193

SIGNATURE: MAIDA E. CHAVECO Ρ 02/07/2004