## 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
DIVISION OF CORPORATIONS

**FILED** 

May 08 1997 8:00am

Secretary of State

DOCUMENT # P96000069695 (0)

COMPACT DISTRIBUTORS, INC.

Principal Place of Business Mailing Address 8500 B.W. 26 COURT MIRAMAR FL 33023 6509 S.W. 26 COURT MIRAMAR FL 33023-3810 3. Date Incorporated or Qualified 3a. Date of Last Report 08/21/1996 NOT APPLICABL 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 Florida Statutes 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BULGIN, JERETA 81 Name 6509 S.W. 26 COURT B2 Street Address (P.O. Box Number is Not Acceptable) MIRAMAR FL 33023 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was 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 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if appropable. 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) TITLE ☐ DELE1E Change 1.1 IID F **BULGIN, JERETA** NAME 1.2 NAME 6509 S.W. 28 COURT STREET ADDRESS 1.3 STREET ADDRESS MIRAMAR FL 33023 CITY-ST-ZIP 1.4 CITY - \$1 - ZIP DELETE Change noitibhA TITLE 2.1 7111.6 SMITH, MAVIS NAME 2.2 NAME 6509 S.W. 26 COURT STREET ADDRESS 2.3 STREET ADDRESS Miramar Fl 33023 CITY-ST-ZIP 2 4 CITY - \$1-7IP DELETE TITLE Change Addition 3.1 TULE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIF DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADORESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLÉ Change Addition 5.1 DUE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - S1 - ZIP TITLE DELETE Change Addition 613006 NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIP 14. I do 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 trusted 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.

SIGNATURE: Abulga Jeketa BULGIN 4-29-97-(954)962-187