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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 COMENT # POSOO

FILED Mar 31 1998 8:00am Secretary of State

SEBASTIAN DISTRIBUTI	96000071466 NG, INC.	(2)			
Principal Place of Posiness	Mailing Addres	· _	# (4801/00) 310 OB314 OB311 OB311 OB311 OB311 80111 10011 10011 50	110 0 144 0 54 1001	
2690 COBAL LANDINS STE 138 2690 CORAL LANDINS STE 138					
PALM HARBOR FL 34884 PALM HARBOR FL 34884			DO NOT WRITE IN THIS COACE	DO NOT WRITE IN THIS SPACE	
	, , , , , , , , , , , , , , , , , , ,		3. Date Incorporated or Qualified	 -	
1			08/26/1996	ĺ	
2. Principal Place of Business	De 20. Mailing Add	res n	4 FEI Number	Applied For	
2. Principal Place of Business 21 470 PALMORE	DK 26 410	PAZIMONEO (0P 59-3394947	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #	, etc.	5. Certificate of Status Desired	75 Additional se Required	
City & State				.00 May Be	
Zip		Country	8. This corporation owes or has paid the current year		
24 34(e / (25 U	5 Pt 29 346	11 30 USIX	Personal Property Tax due June 30. Yes	□ No	
9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent					
COULEY, JEROME J					
			t Address (P.O. Box Number is Not Acceptable)		
PALM HARBOR FL 348	4 - 0				
410 PAZMONZE DR. 83 OLDSMA, PZ 34679 84 CITY					
1 OLDSMAR,	12 34679	84 City	FL 85	Zip Code	
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	soprime obligations on bottom our	oogo, i kanaa ojaloloo.			
	e of registered agent and title if applicable.	(NOTE: Registered Agent signatur	re required when reinstating) OATE		
	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECT		
TITLE -OF YES (DEN)		ELETE 1.1 TITLE	☐ Cha	ange LI Addition	
NAME COOLEY, JEROME J STREET ADDRESS 2890 CORAL LANDINS STE-138		1.2 NAME		3	
0.141.1140000		1.3 STREET ADDRESS		إزّ	
		1.4 CITY - ST - ZIP ELETE 2.1 TITLE	□ Cha	inge Addition C	
NAME 410 PAZ	MORKEDR.	2.2 NAME		ingo ragamon	
STREET ADDRESS 0	monze DR. 100 PZ 34677	2.3 STREET ADDRESS			
CITY-SI-ZIP UCDSMIKE	14 346/11	2.4 CITY-ST-ZIP		1	
TITLE		LETE 3.1 YITLE	Cha	nge Addition	
NAME		3.2 NAME			
STREET ADORESS		3.3 STREET ADDRESS	·	1	
CITY-ST-ZIP		3.4. CITY - ST - ZIP			
TITLE	□ D	T .	Cha	inge ☐ Addition	
NAME		4. 2 NAME	}	1	
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP		4.4 CITY-ST-ZIP			
TITLE	O	4	Cha	nge [] Addition	
NAME expect announce		5.2 NAME		1	
STREET ADDRESS		5.3 STREET ADDRESS	1	1	
CITY-ST-ZIP TITLE	□ D(5.4 CITY-ST-ZIP LETE 6.1 TITLE	Cha	nge Addition	
NAME	<u>.</u>	6.2 NAME)	- Addition	
STREET ADDRESS		6.3 STREET ADORESS		ļ	
CFTY-ST-ZIP		6.4 CITY-ST-ZIP		l	
	on supplied with this filing does not		ted in Section 119.07(3)(i) Florida Statutes, I further certify that	t the information	

14. I 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 emporation or the receiver or trustate empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an attachment with an address.

SIGNATURE

MINNO CHAIR IS

3/5/98