
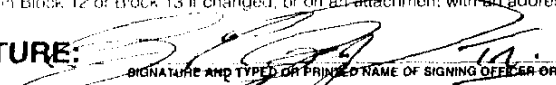


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 16 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000072981 1. Corporation Name ATLANTIC COAST DISTRIBUTORS, INC.					
Principal Place of Business 4180 N. Highway US 1 Melbourne, FL			Mailing Address 4180 N. Highway US 1 Melbourne, FL		
2. Principal Place of Business 21 772 Washburn Suite, Apt. #, etc.		2a. Mailing Address 26 772 Washburn Suite, Apt. #, etc.		3. Date Incorporated or Qualified 09/03/96	
22 City & State 23 Melbourne, FL Zip Country		27 City & State 28 Melbourne, FL Zip Country		3a. Date of Last Report N/A	
24 32935		29 32935		4. FEI Number 59-3400464	
25		30		Applied For Not Applicable	
9. Name and Address of Current Registered Agent PALADIN, JOSEPH 6830 South Highway A1A Melbourne, FL 32591				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
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.				10. Name and Address of New Registered Agent	
SIGNATURE				DATE	
12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE <input type="checkbox"/> DELETE				11 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME PALADIN, JOSEPH				12 NAME	
STREET ADDRESS 6830 South Highway A1A				13 STREET ADDRESS	
CITY- ST- ZIP Melbourne, FL 32591				14 CITY- ST- ZIP	
11 TITLE <input type="checkbox"/> DELETE				21 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME S				22 NAME	
STREET ADDRESS 6830 South Highway A1A				23 STREET ADDRESS	
CITY- ST- ZIP Melbourne, FL 32591				24 CITY- ST- ZIP	
11 TITLE <input type="checkbox"/> DELETE				31 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME TD				32 NAME	
STREET ADDRESS BILLINGTON, BARRY P.				33 STREET ADDRESS	
CITY- ST- ZIP 876 N.W. 6 Avenue				34 CITY- ST- ZIP	
CITY- ST- ZIP Boca Raton, FL 33432				41 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
11 TITLE <input type="checkbox"/> DELETE				42 NAME	
NAME				43 STREET ADDRESS	
STREET ADDRESS				44 CITY- ST- ZIP	
CITY- ST- ZIP				51 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
11 TITLE <input type="checkbox"/> DELETE				52 NAME	
NAME				53 STREET ADDRESS	
STREET ADDRESS				54 CITY- ST- ZIP	
CITY- ST- ZIP				61 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
11 TITLE <input type="checkbox"/> DELETE				62 NAME	
NAME				63 STREET ADDRESS	
STREET ADDRESS				64 CITY- ST- ZIP	
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 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.					
SIGNATURE: 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date: 11-10-97 Time: 954-743-700					

CR2E034 (9/96)