

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 22, 2004 8:00 am
Secretary of State

03-22-2004 90069 046 ***150.00

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1. Entity Name

AMERICAN WHOLESALE TRADERS INC.



Principal Place of Business

9921 NW 80TH AVE
#1-G
HIALEAH FL 33016
US

Mailing Address

8049 W. 18 LN.
HIALEAH FL 33014

64060004



MOORE CR2E034 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0698970

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CERVINO, JOSEPH A
8049 W. 18 LN.
HIALEAH FL 33014

7. Name and Address of New Registered Agent

Name Cervino, Malvis R.

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

8049 W. 18 Ln

City Hialeah

FL

Zip Code 33014

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

(x) Malvis R. Cervino

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete
NAME CERVINO, JOSEPH A
STREET ADDRESS 8049 W 18 LANE
CITY-ST-ZIP HIALEAH FL 33014

TITLE DST ☐ Delete
NAME CERVINO, MALVIS R
STREET ADDRESS 8049 W. 18 LN.
CITY-ST-ZIP HIALEAH FL 33014

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☒ Change ☐ Addition
NAME Cervino, Malvis R.
STREET ADDRESS 8049 W. 18 Ln.
CITY-ST-ZIP Hialeah, FL. 33014

TITLE DTM ☒ Change ☒ Addition
NAME Cervino, Jacinto
STREET ADDRESS 8049 W. 18 Ln.
CITY-ST-ZIP Hialeah, FL. 33014

TITLE DS ☒ Change ☐ Addition
NAME Cervino, Joseph A.
STREET ADDRESS 8049 W. 18 Ln.
CITY-ST-ZIP Hialeah, FL. 33014

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Malvis R. Cervino Malvis R. Cervino DP-3-12-04 305-5584158

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #