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

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE.



FLORIDA DEPARTMENT OF STATE

FILED

Feb 10 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P97000087876 (3)

D & M DISTRIBUTORS GROUP CORP. Principal Place of Business Mailing Address 100 S.W. 110TH AVENUE 100 S.W. 110TH AVENUE DO NOT WRITE IN THIS SPACE MIAMI FL 33174 MIAMI FL 33174 3. Date Incorporated or Qualified 10/10/1997 2. Principal Place of Business 2s. Mailing Address 4. FEI Number Applied For 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional  $\Box$ Certificate of Status Desired. Fee Regulred 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes ☐ No 30 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HERNANDEZ, MANUEL G 100 S.W. 110TH AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) #138 83 **MIAMI FL 33174** 84 Zip Code 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 Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change Addition NAME HERNANDEZ, MANUEL G 1.2 NAME 100 S.W. 110TH AVENUE 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33174** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition SD Change TITLE 2.1 TOTLE PORRO, DORA Y NAME 2.2 NAME 100 S.W. 110TH AVENUE STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33174 CITY-ST-ZIP 2.4 CITY+ST-ZIP DELETE Change ☐ Addition TITLE 3 1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE . . 4.1 Title NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP **Addition** DELETE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 300002428593 NAME 62 NAME -02/12/98--01030--033 STREET ADDRESS 6.3 STREET ADDRESS \*\*\*150.00 CITY-ST-ZIF 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 suppliemental arrival 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 Pleist 13 of Pleist 13 if Parend or on the Internal control of the control of th

officer or director of the corporation or the receiver or trustee empoy Block 12 or Block 13 if charged, or on an attachment with an addre 02-03-98 (305 15545865