

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000091585

FILED  
Mar 30, 2005  
Secretary of State

Entity Name: SAM SELTZER'S DISTRIBUTION, INC.

## Current Principal Place of Business:

4744 NORTH DALE MABRY  
TAMPA, FL 33614

## New Principal Place of Business:

## Current Mailing Address:

4744 NORTH DALE MABRY  
TAMPA, FL 33614

## New Mailing Address:

FEI Number: 59-3493225

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOLLIDAY, RONALD ESQ  
PIPER RUDNICK, LLP  
101 E KENNEDY BLVD, SUITE 2000  
TAMPA, FL 336025149 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: SELTZER, MICHAEL  
Address: 4744 NORTH DALE MABRY  
City-St-Zip: TAMPA, FL 33614

Title: VPAS ( ) Delete  
Name: BLOOM, HYMAN  
Address: 4770 KENT AVE STE 100  
City-St-Zip: MONTREAL, QUEBEC CANADA, H3W 1H2

Title: S X ( ) Delete  
Name: DUBROVSKY, RICHARD  
Address: 4770 KENT AVE STE 214  
City-St-Zip: MONTREAL, QUEBEC CANADA, H3W 1H2

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL SELTZER

P

03/30/2005

Electronic Signature of Signing Officer or Director

Date