## **2000 UNIFORM BUSINESS REPORT (UBR)**

changed, or on an attachment

SIGNATURE:

an address, with all other like empowered.

NOTYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## DOCUMENT # P97000100116 Apr 24, 2000 8:00 am Secretary of State ACCESS DISTRIBUTORS, INC. 04-24-2000 90164 041 \*\*\*150.00 Principal Place of Business Mailing Address 2421 SW 84TH TERRACE 2421 SW 84TH TERRACE MIRAMAR FL 33025 MIRAMAR FL 33025-2154 3. Mailing Address 2. Principal Place of Business Terrace SW 3/SI AVENUE 2421 2013 Suite, Apt. #, etc. PEMBLOILE Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE PARIC City & State City & State Applied For FEI Number Florida 74-2865384 FLORIDA Mirana Not Applicable Country USA 3300<u>9</u> \$8.75 Additional 5. Certificate of Status Desired 302 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WILLIAMS, SONIA Street Address (P.O. Box Number is Not Acceptable) 2421 SW 84TH TERRACE MIRAMAR FL 33025 Zip Code City 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. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. PRESIDENTARDO 13:1 TITLE Change ☐ Addition ☐ Delete TITI F HYLTON, RICARDO NAME . NAME WILLIAMS, SONIA 2421 SW 84th Terrace STREET ADDRESS STREET ADDRESS 2421 SW 84TH TERRACE CITY-ST-ZIP CITY-ST-7IP MIRAMAR FL 33025 Mirana H VICE PRESIDENT TITLE ☐ Addition Delete TITLE HYLTON, SONIA 2421 SW 84th Terrace NAME HYLTON, RICARDO NAME STREET ADDRESS STREET ADDRESS 2421 SW 84TH TERRACE 71 33025 CITY-ST-ZIP Miramas. CITY-ST-ZIP MIRAMAR FL 33025 SECRETARY Change Addition ☐ Delete TITLE GREEN WARLEN NAME 17530 NW 117h AVENUE STREET ADDRESS STREET ADDRESS FL 33169 CITY-ST-ZIP CITY-ST-ZIP MIAMI ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TIT: F Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE THUE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. 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 on trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if