2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED DOCUMENT # P99000073979 1. Entity Name 07 APR 20 AM 11: 44 G.U.S. DISTRIBUTING CORP. CORETARY OF STATE Principal Place of Business Mailing Address 360WAVEA - 2005. main Str - 200 WAVEA 2005. main St BELLE GLADE, FL 33430 BELLE GLADE, FL 33430 No Chg-P CR2E034 (11/05) 03212007 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0938119 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent SHATARA, ABDUL DO NOT WRITE BELLE GLADE, FL 33430 IN THIS SPACE of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity submits this statement the obligations of registered agent. SIGNATURE (NOTE, Registered Agent signature required when reinstating) e of registered agent and title 4 applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. PD IITLE SHATARA, ABDUL NAME STREET ADDRESS 1073 S.E. 2ND. STREET BELLE GLADE, FL 33430 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-SI-ZIP TITLE STREET ADORESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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:

JC 4/20

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