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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **V19362** 1. Corporation Name

NICS INTERNATIONAL DISTRIBUTING CO.

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90300 020 ***150.00

PRISEROKE PINES FL 30026 S. W. 101 TREACE PEMBROKE PINES FL 30026 PETELLA, LUIS F. B31 SY 100 TERRACE PEMBROKE PINES FL 30026 18 Street Address of Sustant of the provisions of Sections 607 5002 Panel Box 1 street Address of Section 607 5003 Panel Box 1 street Address of Sustant of Sections 1 street Address of Sustant of Susta		. 1			_				
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Zip Country Zip Country Zip Country 2	⊢ ′		28						
9. Name and Address of Current Registered Agent 8ETTELLA, LUIS F. 831 SW 100 TERRACE PEMBROKE PINES FL 33025 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sactions 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Princis Statutes. SIGNATURE 35 Sirest Address (P.O. Box Number is Not Acceptable) 86 City FL 85 Zip Code 17. Pursuant to the provisions of Sactions 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Princis Statutes. SIGNATURE 35 Signature, hope or printed name of registered agent and tile if epicicate (Printing Agent Sporture register sporture register inventoring board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607,0505, Princis Statutes. SIGNATURE 35 Signature, hope or printed name of registered agent and tile if epicicate (Printing Agent Sporture register inventories when remaining) BATE DELETE 13 TITLE DELETE 13 TITLE DELETE 14 TITLE DELETE 14 TITLE DELETE 15 TITLE DELETE 15 TITLE DELETE 44 TITLE DELETE 44 TITLE DELETE 45 TITLE DELETE 45 TITLE DELETE 57 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1. Change Adv. Adv. OTY-51-2P TITLE DELETE 45 TITLE DELETE 45 TITLE DELETE 57 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1. Change Adv. Adv. OTY-51-2P TITLE DELETE 45 TITLE DELETE 57 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS AN		Country			Country		8. This corporation owes the current year	r Intangible	
8. Name and Address of Current Registered Agent 8ETTELLA, LUS F. 631 SW 100 TERRACE PEMBROKE PINES FL 33025 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Sicitutes, the above-named corporation submits this statement for the purpose of changing its 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 agent. The formation of registered agent agent agent and accept the obligations of, Section Scientifications of Sections Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1: ITTLE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1: ITTLE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1: ITTLE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1: ITTLE 13. SERSET ADDRESS CITY ST.2P 14. Change Agent and the provision of section and applications of sections are application of sections and applications of sections are applications of sections and applications of sections are applicated agent applications are applicated. The provisions are applicated agent applications are applicated agent applications are applicated. The provisions are applicated agent applications are applicated. The provisions are applicated agent applications are applicated. The provisions are applicated agent applications are applicated agent applications are applicated. The provisions are applicated agent applications are applicated. The provisions are applicated agent applications are applicated agent applications are applicated. The provisions are applicated agent applications applications are applicated by the corporation submitis this statement for the purpose of changing its registered agent applications applications applications are applications and applications applications are applications and applications applications applications are applications are applicated by the corporations applications applications	24	. 25	29	30	0		Personal Property Tax.	☐ Yes	□No
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R31 SW 100 TERRACE PEMBROKE PINES FL 33025 83 84 City FL 85 Zip Code 11. 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 appropriate of Sections 607.0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. TITLE D Change Adv. STREET ADDRESS CITY-ST-ZP TITLE DELETE 1.1 TITLE DELETE 2.1 TITLE DELETE 2.1 TITLE DELETE 3.1 TITLE Change Adv. ANAME 3.2 SINEET ADDRESS CITY-ST-ZP TITLE DELETE 3.3 SINEET ADDRESS CITY-ST-ZP TITLE DELETE 3.3 SINEET ADDRESS CITY-ST-ZP TITLE DELETE 3.1 TITLE Change Adv. ANAME 3.2 SINEET ADDRESS CITY-ST-ZP TITLE DELETE 3.3 SINEET ADDRESS SINEET ADDRESS CITY-ST-ZP TITLE DELETE 3.3 SINEET ADDRESS SINEET ADDRE					81	Name			
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11. Pursuant to the provisions of Sections 607.0502 and 607.1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE		•			84	City		. 85 Zip	Code
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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 supplemental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 807. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an appear of the corporation of the receiver or trustee empowered.

SIGNATURE: