2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 09, 2005
Secretary of State

DOCUMENT# V49556

Entity Name: ANTILLES WHOLESALE COMPANY

Current Principal Place of Business:

7201 NW 35TH AVENUE
MIAMI, FL 33147

New Principal Place of Business:

5930 NW 99TH AVE
#10
DORAL, FL 33178

Current Mailing Address:

7201 NW 35TH AVENUE
MIAMI, FL 33147

New Mailing Address:

5930 NW 99TH AVE
#10
DORAL, FL 33178

FEI Number: 65-0481297 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURKE, JOSEPH C
744 LAKEVIEW DR
MIAMI BEACH, FL 33140 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: JOSEPH C. BURKE

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BURKE, JOSEPH C
Address: 744 LAKEVIEW DR
City-St-Zip: MIAMI BEACH, FL 33140

Title: S ( ) Delete
Name: BURKE, JUNE
Address: 5534 PINE TREE DR
City-St-Zip: MIAMI BEACH, FL 33140

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP ( ) Change (X) Addition
Name: BURKE, TERESA
Address: 744 LAKEVIEW DR
City-St-Zip: MIAMI BEACH, FL 33140

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: JOSEPH C. BURKE P 11/09/2005

Electronic Signature of Signing Officer or Director Date