

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000000207

**FILED  
Apr 13, 2018  
Secretary of State  
CC7282631597**

**Entity Name:** CBI DISTRIBUTING CORP.

**Current Principal Place of Business:**

2400 W. CENTRAL ROAD  
HOFFMAN ESTATES, IL 60195

**Current Mailing Address:**

3 SW 129TH AVENUE  
PEMBROKE PINES, FL 33027 US

**FEI Number:** 65-0135574

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

REGISTERED AGENT SOLUTIONS, INC  
155 OFFICE PLAZA DR., SUITE A  
TALLAHASSEE, FL 32301 US

*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

**Officer/Director Detail :**

Title           VP  
Name           ROBINSON, BLAINE  
Address        3 SW 129TH AVENUE  
City-State-Zip: PEMBROKE PINES FL 33027

Title           SECRETARY  
Name           SERNETT, STEVE  
Address        2400 W. CENTRAL ROAD  
City-State-Zip: HOFFMAN ESTATES IL 60195

Title           DIRECTOR  
Name           RON, MARSHALL  
Address        2400 W CENTRAL ROAD  
City-State-Zip: HOFFMAN ESTATES FL 60195

*I hereby 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 all other like empowered.*

**SIGNATURE:** BLAINE ROBINSON

**VICE PRESIDENT**

**04/13/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date