


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 04, 2004 08:00 AM
Secretary of State

DOCUMENT # 350978 1. Entity Name SOUTHERN WINE & SPIRITS OF AMERICA, INC.	
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Principal Place of Business 1600 N.W. 163RD STREET MIAMI, FL 33169	Mailing Address 1600 N.W. 163RD STREET MIAMI, FL 33169
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07302004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1285876	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**BREIER, ROBERT G ESQ.
BREIER AND SEIF, P.A.
2800 PONCE DE LEON BLVD., SUITE 1125
CORAL GABLES, FL 33134-6912**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEOD CHAPLIN, HARVEY R 1600 N.W. 163RD ST. MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PCOD CHAPLIN, WAYNE E. 1600 N.W. 163RD ST. MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S HAGER, LEE 1600 N.W. 163RD ST. MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SRVP DICK, MELVIN A 1600 NW 163RD ST MIAMI, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPT BECKER, STEVEN R 1600 N.W. 163RD ST. MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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08/04/04-80006-002 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steven R. Becker

7/29/04

Date

(305) 625-4171

Daytime Phone #