## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F98000003064

Entity Name: NOLET SPIRITS U.S.A., INC.

FILED Apr 24, 2006 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
30 JOURN ALISO VIE	EY JO, CA 92656	3			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
30 JOURNEY ALISO VIEJO, CA 92656					
FEI Number:	88-0341090	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
NRAI SERVICES, INC. 2731 EXECUTIVE PARK DR., SUITE 4 WESTON, FL 33331 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.					
SIGNATUR		nic Signature of Registered Agent		 Date	
Election Can		g Trust Fund Contribution ( ).		Date	
OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS					
Title: Name: Address: City-St-Zip:	DP ( ELDIEN, WILLI 30 JOURNEY ALISO VIEJO,		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DVST ( NOLET, CARO 30 JOURNEY ALISO VIEJO,		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	CD ( NOLET, CARL 30 JOURNEY ALISO VIEJO,		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( NOLET, BOB 30 JOURNEY ALISO VIEJO,	) Delete CA 92656	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( IJFF, JAN 30 JOURNEY ALISO VIEJO,	) Delete CA 92656	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: WILLIAM L. ELDIEN DP 04/24/2006