2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000001599

Entity Name: GOPI OF FLORIDA. INC.

FILED Jul 15, 2005 Secretary of State

The state of the s							
Current Principal Place of Business:				New Principal Place of Business:			
4425 BLICHTON RD B1							
OCALA, FL 34482							
Current Mailing Address:				New Mailing Address:			
4425 BLICHTON RD B1 OCALA, FL 34482							
FEI Number:	59-3701331	FEI Number Applied For()	FEI Nun	nber Not Appli	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Na					Name and Address of New Registered Agent:		
PATEL, ATUL 4097 ALESBURY DRIVE JACKSONVILLE, FL 32224 US The above named entity submits this statement for the purpose of				LIQUOR AT THE MARKETPLACE 4425 BLICHTON RD B1 OCALA, FL 34482 US of changing its registered office or registered agent, or both.			
in the State of Florida.							
SIGNATURE: VIJAY PATEL				07/15/2005			
Electronic Signature of Registered Agent 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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:							
Title: Name: Address: City-St-Zip:		Delete DRIVE		Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	S () MOTIWALA, BH 8019 SABLE CF JACKSONVILLE	REEK DR		Title: Name: Address: City-St-Zip:	MOTIWALA, 8019 SABLE		
Title: Name: Address: City-St-Zip:	S () PATEL, ATUL D 4097 ALESBUR JACKSONVILLE			Title: Name: Address: City-St-Zip:	S PATEL, A 4425 BLICH OCALA, FL		
Title: Name: Address: City-St-Zip:	VP () KAPADIA, VISP 1197 BENTLEY LEESBURG, FL	RD APT # 2		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	S () NOBLES, MEHE 1197 BENTLEY LEESBURG, FL	RD APT #3		Title: Name: Address: City-St-Zip:	NOBLE, MEH	EY RD APT #3	

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: VIJAY PATEL P 07/15/2005