

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000061694

Entity Name: SOUTHERN WINE & SPIRITS OF VIRGINIA, INC.**Current Principal Place of Business:**2800 PONCE DE LEON BLVD STE 1125
CORAL GABLES, FL 33134**Current Mailing Address:**1600 NW 163 STREET
ATTN: TAMMY LOVE
MIAMI, FL 33169 US**FEI Number:** 20-2780384**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SCHERMER, STEVEN J
2800 PONCE DE LEON BLVD STE 1125
CORAL GABLES, FL 33134 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 PRESIDENT, CEO, DIRECTOR
Name CHAPLIN, WAYNE E
Address 1600 N.W. 163 STREET
City-State-Zip: MIAMI FL 33169

Title VP, TREASURER, DIRECTOR
Name BECKER, STEVEN R
Address 1600 NW 163 STREET
City-State-Zip: MIAMI FL 33169

Title CHAIRMAN, DIRECTOR
Name CHAPLIN, HARVEY R
Address 1600 NW 163 STREET
City-State-Zip: MIAMI FL 33169

Title VP
Name DICK, MELVIN A
Address 1600 NW 163 STREET
City-State-Zip: MIAMI FL 33169

Title VP, SECRETARY
Name HAGER, LEE F
Address 1600 NW 163 STREET
City-State-Zip: MIAMI FL 33169

Title DIRECTOR
Name CHAPLIN, PAUL B
Address 1600 NW 163 STREET
City-State-Zip: MIAMI FL 33169

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: STEVEN R BECKER

VPTD

04/21/2016

Electronic Signature of Signing Officer/Director Detail_____
Date