

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000093944

Entity Name: SOUTHERN WINE & SPIRITS OF NEW YORK, INC.**Current Principal Place of Business:**2800 PONCE DE LEON BLVD. #1125
CORAL GABLES, FL 33134**Current Mailing Address:**2800 PONCE DE LEON BLVD. #1125
CORAL GABLES, FL 33134**FEI Number:** 65-0879542**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BREIER, ROBERT G
2800 PONCE DE LEON BLVD. #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	PCOD
Name	CHAPLIN, WAYNE E
Address	1600 N.W. 163 STREET
City-State-Zip:	MIAMI FL 33169

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

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

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

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

Title	D
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

04/25/2013

Electronic Signature of Signing Officer/Director Detail_____
Date