


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 26, 2007 08:00 AM
Secretary of State

DOCUMENT # 335176	
1. Entity Name ALPINE LIQUOR INC	

Principal Place of Business 7501 NEBRASKA AVENUE TAMPA, FL 33604	Mailing Address 7501 NEBRASKA AVENUE TAMPA, FL 33604
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DO NOT WRITE IN THIS SPACE



07232007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1219438	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

MANOLT, ALBERT V III
408 4TH AVENUE NORTH
TIERRA VERDE, FL 33715

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	UN00000770589 07/26/07-80004-005 550.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MANOLT, ALBERT V JR 7501 N. NEBRASKA AVE. TAMPA, FL 33604
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSD MANOLT, ALBERT V III 408 4TH AVENUE NORTH TIERRA VERDE, FL 33715
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VTD MANOLT, MIKE 429 EAST COUNTY LINE RD. LUTZ, FL 33549
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: ALBERT V. MANOLT, III : ALBERT V. MANOLT, III 7-23-07 (813) 239-3595

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #