2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 29, 2008 8:00 am Secretary of State 05-29-2008 90194 034 ***150.00

1. Entity Nar	IMENT #490798 A BEVERAGE LICENSE, IN				3 90194 034 ***15	60.00		
Principal Plac	ce of Business	Mailing Address	<u> </u>	יטגען 🗕	000.			
8225 SW. 56 ST MIAMI, FL 33155 US		8225 SW. 56 ST	os		FO 10111 KOID INGIN 10161 I	ISI BIBII BIBII BIBII BIBII BIBII BIBII BIB	171 00 1 IN 1001	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		05272008	Chg-P	CR2E034 (12/06)		
City & State		City & State		4. FEI Numb		<u> </u>	oplied For ot Applicable	
Zip	Country	Zip	Country		of Status Desired	S8.75 Add Fee Require		
	6. Name and Address of Current	Registered Agent	Niero	7. Name and	d Address of New I	Registered Agent		
VALDES, RENE M.			Name	Name				
8225 SW 56 ST. MIAMI, FL 33155			Street Addres	Street Address (P.O. Box Number is Not Acceptable)				
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			City			FL Zip Cod		
8. The above the obliga	a named entity submits this statement to tions of registered agent.	or the purpose of changing its	registered office or regis	stered agent, or bo	oth, in the State of Fl	lorida. I am familiar with,	and accept	
SIGNATURE.	Signature, typed or printed name of registered agent	and little if applicable. (NOTE	: Registered Agent signature req	ured when reinstating)		DATE		
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008 9. Election Campaign Fina Trust Fund Contribution.				\$5.00 May Be Added to Fees	In accordance corporation did	with s. 607.193(2)(b), not receive the prior	F.S., the notice.	
10. OFFICERS AND DIRECTORS		DIRECTORS	11.	ADDITIONS	L /CHANGES TO OFF	FICERS AND DIRECTORS	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VALDES, RENE M ** 8225 SW 56 ST. MIAMI, FL 33155	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE	STD	□ Delete	TITLE			Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	VALDES, MARIA N 8225 SW 56 ST. **** MIAMI, FL 33155	· ·	NAME STREET ADDRESS CITY-ST-ZIP			□ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Oelete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
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TITLE NAME		☐ Delete	TITLE NAME			☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with		STREET ADDRESS CITY-ST-ZIP			-		

I nereby certify that the information supplied with this filing does not qualify for the exemplions 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 oalt; that I am an officer or director of the corporation of the feeling 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: _

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

FLORIDA BEVERAGE LICENSE, INC. 8225 SW 56 ST. MIAMI, FL 33155

ATTACHMENT

40106067

May 27, 2008

Florida Department of State Division Of corporations P. O. Box 6327 Tallahassee, FL 32314

Re

Florida Beverage License, Inc. Document No. 490798 Annual Report

Year: 2008

Ladies and Gentlemen,

The corporation kindly requests the waiver of the \$ 400 late fee because the annual report notice was not received.

Thanking you in advance for your kind assistance I remain.

Sincerely,

For Rene Valdes, President