FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

GENARO'S LIQUORS, INC.

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FILED

Apr 22 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address				i annend diete nemin sente sonne etent erbe at	nu minti ninii arbti ninii fibis (00)	
	DF MEXICO DRIVE KEY FL 34228	6852 GULF OF MEXICO DI LONGBOAT KEY FL 34228	RIVE			
				DO NOT WRITE IN	THIS SPACE	
				3. Date Incorporated or Qualified		
9 Principal C	Disca of Divisions	Lo- Marris Asia	·····	10/23/1979		
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21 Sulte, Apt.	# ata	Suite, Apt. #, etc.		59-1949651	Not Applicable	
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	l e	City & State		6. Election Campaign Financing	_ \$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid t		
24	25 9, Name and Address of Curre	29 3	30	Personal Property Tax due June 30.		
		nt Hegistered Agent	81 Name	10. Name and Address of New Regist	tered Agent	
	FLAMME, RAYMOND					
	80 BAYOU CIRCLE		82 Street Ad	Idress (P.O. Box Number is Not Acceptable)		
Longboat key fl 34228			68	50 GULF OF ME	EXICO DR	
			83			
			84 City		Top Code	
			NONG	GBOAT KEY	FL 85 Zip Code 347>8	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar 300, and accept the obligations of, Section 607.0505, Florida Statutes.						
	KILAK LAN			0 9000 1000	uluslagi	
SIGNATURE	Ignature, typed or printed name of registered ag	re R.L. LI	Registered Agent signature req	E PRESIDENT	7 112 148	
12,		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12	
TITLE	PTD	DELETE	1.1 TITLE	ABBITIONO/OFFAINALO TO OFFICER	Change Addition	
NAME	LAFLAMME, RAYMOND	L.	1.2 NAME		Z change Z radition	
STREET ADDRESS	3580 BAYOU CIRCLE			850 GULF OF MI	EVICO DR	
	LONGBOAT KEY FL			SO GULF DI MI		
CITY-ST-ZIP TITLE	CSD	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition	
NAME	LAFLAMME, JOAN A.				Change C Addition	
	3580 BAYON CIRCLE		2.2 NAME		i	
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP	LONGBOAT KEY FL	DELETE	2. 4 CITY - ST - ZIP			
TITLE	VPD	DELETE	3.1 TITL€		Change Addition	
NAME	LAFLAMME, LORI A.		3.2 NAME			
STREET ADDRESS	651 JUNGLE QUEEN WAY		3.3 STREET ADDRESS			
CITY-ST-ZIP	LONGBOAT KEY FL	DELETE	3.4. CITY-ST-ZIP			
TITLE	VPD	☐ DELETE	4.1 TITLE		Change Addition	
NAME	LAFLAMME, GARY R.		4. 2 NAME		İ	
STREET ADDRESS	6128 NICOLE DR.		4.3 STREET ADDRESS			
CITY-ST-ZIP	SARASOTA FL		4.4 CITY-ST-ZIP	10/00		
TITLE		☐ DELET e	5.1 TITLE	AFLAMME, RANDAL SOI GULF DR BRADENTON, FL 34:	Change Addition	
NAME			5.2 NAME	TANDAL	•	
STREET ADDRESS			5.3 STREET ADDRESS	801 GULF DR		
CITY-ST-ZIP			5.4 CITY-ST-ZIP	BRADENTON, FL 34:	>17	
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS	12		6.3 STREET ADDRESS			

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an altachment with an address.