2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 642731

Title:

Name:

Address:

City-St-Zip:

VPD

() Delete

1801 GULF DRIVE N. UNIT 150

BRADENTON BEACH, FL 34217

LAFLAMME, GARY R

Entity Name: GENARO'S LIQUORS, INC.

Mar 12, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6852 GULF OF MEXICO DRIVE LONGBOAT KEY, FL 34228 **Current Mailing Address: New Mailing Address:** 6852 GULF OF MEXICO DRIVE LONGBOAT KEY, FL 34228 FEI Number: 59-1949651 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LAFLAMME, RAYMOND 6850 GULF OF MEXICO DR LONGBOAT KEY, FL 34228 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 This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition LAFLAMME, RAYMOND, Name: Name: 1007 93RD STREET N.W. Address: Address: BRADENTON, FL 34209 City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition CSD Name: LAFLAMME, JOAN A. Name: LAFLAMME, JOAN A 1007 93RD STREET N.W. 1007 93RD STREET N.W. Address: Address: BRADENTON, FL 34209 BRADENTON, FL 34209 City-St-Zip: City-St-Zip: Title: () Delete (X) Change () Addition VPD Title: VPD LAFLAMME, RANDAL J LAFLAMME, RANDAL J Name: Name: 109 10TH STREET N. UNIT 1B 6850 GULF OF MEXICO DR. Address: Address: City-St-Zip: BRADENTON BEACH, FL 34217 City-St-Zip: LONGBOAT KEY, FL 34228

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

VPD

LAFLAMME, GARY R

7511 4TH STREET N.W.

BRADENTON, FL 34209

(X) Change () Addition

SIGNATURE: R. L. LAFLAMME **PRES** 03/12/2002