2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 852334

Address:

City-St-Zip:

355 RIVERSIDE AVENUE

WESTPORT, CT 06880

FILED Apr 06, 2004 Secretary of State

Entity Name: DOMECQ IMPORTERS INC.						
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
355 RIVERS WESTPOR	SIDE AVE T, CT 06880					
Current Mailing Address:			New Maili	New Mailing Address:		
P.O. BOX 3 DETROIT, I	3006 MI 48232500	6 US				
FEI Number: 13-3097971 FEI Number Applied For ()		FEI Number Not Appl	Number Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
1200 SOUT	ORATION SY TH PINE ISLA DN, FL 3332	ND ROAD				
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.						
SIGNATUR	E:					
	Electro	nic Signature of Registered Ager	nt		Date	
Election Cam	paign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	S (KENNEDY, MI 355 RIVERSID WESTPORT, O	E AVE	Title: Name: Address: City-St-Zip:	SD (X KENNEDY, MIC 355 RIVERSID WESTPORT, C	E AVE	
Title: Name: Address: City-St-Zip:	CPD (BELLINGER, F 355 RIVERSID WESTPORT, C	E AVE	Title: Name: Address: City-St-Zip:	() Change()Addition	
Title: Name: Address: City-St-Zip:	ARIZA, ANTON AVENIDA MEX		Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	CREMERING, 2072 RIVERSI) Delete MICHAEL J DE DRIVE EAST ITARIO, ON N8Y 4S5	Title: Name: Address: City-St-Zip:	() Change()Addition	
Title: Name:	D (X KENNEDY, MI	() Delete GUEL	Title: Name:	() Change ()Addition	

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.

Address:

City-St-Zip:

SIGNATURE: MICHAEL J. CREMERING AT 04/06/2004