

**2004 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2004**

**FILED**  
**Feb 11, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A92000000140</b>					
<b>1. Entity Name</b> PLAZA LIQUORS, LTD.					
<b>Principal Place of Business</b> 401 WEST COLONIAL DRIVE, SUITE 7 ORLANDO, FL 32804			<b>Mailing Address</b> 401 WEST COLONIAL DRIVE, SUITE 7 ORLANDO, FL 32804		
<b>2. Principal Place of Business</b>			<b>3. Mailing Address</b>		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		Country	
<b>6. Name and Address of Current Registered Agent</b>				<b>7. Name and Address of New Registered Agent</b>	
MACARTHUR, WILLIAM H 401 W. COLONIAL DRIVE, SUITE 7 ORLANDO, FL 32804				Name Street Address (P.O. Box Number is Not Acceptable) City	
FL				Zip Code	
<b>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.</b>					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
<b>9. Capital Contributions as Shown on record.</b>			<b>10. Amount of Capital Contributions in FLORIDA to date.</b>		
\$295,000.00			295,000.00		
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
<b>12. GENERAL PARTNER INFORMATION</b>			<b>13. ADDRESS CHANGES ONLY</b>		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P92000002891 BDC LIQUORS, INC. 401 W. COLONIAL DRIVE, SUITE 7 ORLANDO, FL 32804		STREET ADDRESS CITY-ST-ZIP	000000069156 02/28/04-80001-017 526.25	
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<b>14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes</b>					
<b>SIGNATURE:</b>			LIZ CONANT ASST SEC/TREAS BDC LIQUORS, INC. 2/5/04 407-425-8276		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date Daytime Phone #		

STAPLE CHECK HERE