

**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

**FILED**  
**May 01, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # A92000000140**

1. Entity Name  
**PLAZA LIQUORS, LTD.**



Principal Place of Business  
**401 WEST COLONIAL DRIVE, SUITE 7  
ORLANDO, FL 32804**

Mailing Address  
**401 WEST COLONIAL DRIVE, SUITE 7  
ORLANDO, FL 32804**



04112006 No Chg-LP

CR2E003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3155287**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**MACARTHUR, WILLIAM H  
401 W. COLONIAL DRIVE, SUITE 7  
ORLANDO, FL 32804**

**DO NOT WRITE  
IN THIS SPACE**

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.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$500.00**  
**After May 1, 2006, Fee will be \$900.00**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
**NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

**12. GENERAL PARTNER INFORMATION**

DOCUMENT # **P92000002891**  
NAME **BDC LIQUORS, INC.**  
STREET ADDRESS **401 W. COLONIAL DRIVE, SUITE 7**  
CITY-ST-ZIP **ORLANDO, FL 32804**

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1000000554782  
05/15/06-80007-017 \$00.00

**DO NOT WRITE  
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14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE: **X William H. Macarthur** **William H. Macarthur** **427-06** **(407) 425-8276**