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May 09, 2000 8:00 am  
Secretary of State

05-09-2000 90120 026 \*\*\*150.00

CORPORATION  
ANNUAL REPORT.



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

2000

DOCUMENT # F20153  
1. Corporation Name  
TUTO'S LIQUORS, INC.

Principal Place of Business  
1438 Collins Ave.  
Miami Beach, FL 33139  
Mailing Address  
8758 SW 8th Street  
Miami, FL 33174

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 02/18/1981  
3a. Date of Last Report

2. Principal Place of Business  
21  
2a. Mailing Address  
26

4. FEI Number 59-2071771  
Applied For Not Applicable

Suite, Apt. #, etc.  
22  
27

5. Certificate of Status Desired  \$8.75 Additional Fee Required

City & State  
23  
28

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

Zip Country  
24 25  
29 30

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PACHECO, ZUNILDA  
1430 Michigan Avenue  
Miami Beach, FL

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida 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 with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Zunilda Pacheco* (NOTE: Registered Agent signature required when reinstating) DATE 04-24-00

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P/D  
NAME Pacheco, Zunilda  
STREET ADDRESS 1430 Michigan Ave  
CITY-ST-ZIP Miami Beach, FL

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE S  
NAME Pacheco, Jose  
STREET ADDRESS 1430 Michigan Ave.  
CITY-ST-ZIP Miami Beach, FL

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished with this filing and does not qualify for the exemption stated in Section 119.07(3)(k), 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 attachment with an address.

SIGNATURE: *Zunilda Pacheco* 4/24/00  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #