

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000004182

1. Entity Name

BETTER BEVERAGE IMPORTERS CO.

FILED

Jan 22, 2001 8:00 am
Secretary of State

01-22-2001 90032 028 ***150.00

0576576

Principal Place of Business
410 NEW CHURCHMANS RD
NEW CASTLE DE 19720
US

Mailing Address
PO BOX 11970
WILMINGTON DE 19850
US

60007223



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
275 Grand Blvd
Suite, Apt. #, etc.

3. Mailing Address
275 Grand Blvd
Suite, Apt. #, etc.

City & State
Westbury NY
Zip 11590 Country USA

City & State
Westbury NY
Zip Country USA

4. FEI Number 59-3267720
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
BINGHAM, ROBERT
3300 COVE CAY DRIVE APT 2F
CLEARWATER FL 33760

7. Name and Address of New Registered Agent
Name Robert Bingham
Street Address (P.O. Box Number is Not Acceptable)
2600 St. Andrews Blvd
City Tarpon Springs FL Zip Code 34689

New Address Only

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP BINGHAM, PAULINE 3300 COVE CAY DR. APT 5D CLEARWATER FL 33760 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BINGHAM, ROBERT 3300 COVE CAY DR. APT. 5D CLEARWATER FL 33760 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BOGGS, CRAIG 141 VINTON CIRCLE FANWOOD NJ 07023 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TSP RENZETTE, LEO PO BOX 758 N/A NEW CASTLE FL <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Richard J DeCicco 3379 Jason Ct Bellmore NY 11710 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Kathryn DeCicco 3379 Jason Ct Bellmore NY 11710 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

Attachment
B6007223
F9460006 4/182

BETTER BEVERAGE IMPORTS
1500 Maryland Avenue
Wilmington, Delaware 19805
Tel: 302 655 7021
Fax: 302 655 6027

FED ID NO: 59-3267720

KNOW ALL MEN BY THESE PRESENTS: That, **Better Beverage Imports** under the laws of the state of Delaware residing or having its principal place of business at **275 Grand Boulevard, Westbury, New York 11590** hereby constitutes and appoints **Kathleen Law**, to act for and on its behalf as a true and lawful agent and attorney of the grantor for and in the name, place and stead of said grantor, from this date, in the United States (the "territory") either in writing, electronically, or by other authorized means to:

Sign and swear to any document and to perform any act that may be necessary or required by law or regulation in connection with the applying for, renewing of, and change of ownership required in connection with liquor, spirits, wine and beer Licenses or permits;

And generally to transact business with all regulatory agencies with regard to licenses and permits.

This power of attorney to remain full force and effect until revocation in writing is duly given and received by grantee.

IN WITNESS WHEREOF, the said Better Beverage Imports, caused these presents:

To be sealed and signed: (signature) William B. Bluff

(Capacity) Vice-President Date 12/12/00

Witness: David E. Long