## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

21427 NW 2 AVE   MIAMI FL 33189	1. Corporation	MENT # <b>F96</b> 7 ''S LIQUOR STORE, INC	<b>\-</b> /			4 118/118 (III) 14/12 (III) 1888 (III)	ti liði ðiðii þiðis þíðis a	(Bil Biāli Biāli 110)
MIAMI FL 33169  MIAMI FL 33169  3. Date Incorporated or Quarted  38. Date of Last Report  08/24/1982  2. Fining all Place of Rusiness  2. Making Actross  2. Fining all Place of Rusiness  2. Solito, Apr. 4, etc.  Solito, Apr. 4, etc.  Solito, Apr. 4, etc.  Solito, Apr. 4, etc.  City & State  City & State  City & State  City & State  1. Country  2. Page  2. Country  2. Page  2. Country  2. Page  3. Date Incorporated or Quarted  4. FET Number  5. Certificate of Status Desired   Fee Requir  Fee Requir  7. Country   Zep.   Country  2. Page  3. Date Incorporated or Quarted  4. FET Number  5. Certificate of Status Desired   Fee Requir  Fee Requir  7. Country   Zep.   Country  2. Page  3. Date of Country   State  6. Election Comparing Financing   St.000 Miss   Fee Requir  7. Footbas Statutes  7. Incorporation to busy for interplate funders in 199.0  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Financial to this provisions of Scotlone 607 0502 and 607 1509, Floridal Statutes  4. Country   Winnie   St. Name  4. Country   Winni	Principal Place of Business Mailing Address							
Provide the conference of Fusiness   2a. Molling Address   4. FET Number   Application   Applicati								
Suite Apt #, etc   Suite Apt #, etc   Suite, A	i 🗸 Walang tiyan					08/24/1982	<b>I</b>	•
Solito April 4, etc.    Solito April 4, etc.   Solito   Selection Company Francisco   Selection		ace of Business	h1					Applied For
See Required State   See   Section   Secti	Suite Apt	Suite Apt #, etc. Suit		uite, Apt. #, etc.		E 0. 15 . (0) . D		Not Applicable  75 Additional
28							└ Fee	e Required
Zep	1		h1 '					
MCCATHY, WINNIE I. 21427 NW 2 AVE MIAMI FL 33169  82 Street Address (P.O. Box Number is Not Acceptable)  83 City FL 85 Zip Code  84 City FL 85 Zip Code  85 Zip Code  86 City FL 85 Zip Code  87 Zip Code  88 City FL 85 Zip Code  88 City FL 85 Zip Code  89 Zip Code  89 Zip Code  80 Zip Code  8	** 1	<u>├</u>	<b>├</b> ─-,	<u> </u>		This corporation has liability for intangible tax under s 199,032,		
MCCATHY, WINNIE I. 21427 NW 2 AVE MIAMI FL 33169  82 Street Address (P.O. Box Number is Not Acceptable)  83		9. Name and Address of Cu						
21427 NW 2 AVE MIAMI FL 33169  84 City FL 85 Zip Code  11. Fursion to the provisions of Sections 607,0502 and 607,1508, Fiorida Statutes, the above named corporation submits this statement for the purpose of changing its register or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, it horeby accept the appointment as registered agent.  SIGNATURE  Signature  The provisions of Sections 607,0502 and 607,1508, Fiorida Statutes.  SIGNATURE  Signature  Signature  The provisions of Sections 607,0502 and 607,0505, Fiorida Statutes.  SIGNATURE  Signature laurate problem for registered agent active in provision agent active finglish and months of the purpose of changing its registered agent. Applications in provision in purpose of changing its registered agent. Applications in provision in purpose of changing its registered agent. Applications is board of directors, it horeby accept the appointment as registered agent. Applications is board of directors, it horeby accept the appointment as registered agent.  12. Of FIGE 8 AND DIRECTORS  13. Intellege	140047	23.4 A.		81	Name			
MIAMI FL 33169  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 register or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent.  SIGNATURE  Signature  12. Of HICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN AMB.  14. THE TABLES SHELLAGERSS  OIT STATE  MIAMI FL  DELETE  1 THE  12 NAME  13 SIREEL ADDRESS  OIT STATE  DELETE  2 THE  22 NAME  23 SIREEL ADDRESS  CITY STATE  DELETE  33 SIREEL ADDRESS  OIT STATE  AND.  SIREEL ADDRESS  OIT					Street Addr	ress (P.O. Box Number is Not Acceptable)		
11. Fursion 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 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. Containing with an accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature typical properties of supplications of such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Containing the containing the provisions of Section 607.0505, Florida Statutes.  SIGNATURE  Signature typical properties and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  OF LICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Name  12 Name  13 STREET ADDRESS  CITY ST-7P  MIAMI FL  DEFFE  14 DIRECTORS IN 12 Name  14 DIRECTORS IN 12 Name  15 STREET ADDRESS  CITY ST-7P  DIRECTORS IN 14 DIRECTORS IN				83				
11. Fursional 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 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, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature transfer problet per strengths and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature transfer problet per strengths and present agents and the remarking part of the appointment as registered agent.  In the state of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent.  SIGNATURE  Signature transfer problet per strengths and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature transfer problet per strengths and accept the appointment as registered agent.  In the section of the corporation submits this statement for the purpose of changing its registered agent.  In the section of the corporation submits this statement for the purpose of changing its registered agent.  In the section of the corporation submits this statement for the purpose of changing its registered agent.  In the section of the corporation submits this statement for the purpose of changing its registered agent.  In the section of the corporation submits this statement for the purpose of changing its registered agent.  In the section of the corporation submits the purpose of defent agent and accept the corporation submits the purpose of defent agent.  In the section of the corporation submits the specific agent and accept the corporation submits the appointment are depent.  In the section of the corporation submits the specific agent agent.  In the section of the corporation of the corporation of the corporation submits the submit agent agent.  In the section of the corporation of the				94	City		- last :	<del> </del>
SIGNATURE   Secretary with, and accept the obligations of, Section 607.0505, Forda Statutes.								•
Signature   Sign					named corpor oration's boar	ration submits this statement for the purp rd of directors. I hereby accept the appo	cose of changing its intract as registers	registered office ad agent. I am
12	TO THE VEIL	n, and accept the obligations or,	Section 607.0505, Florida Statutes	i.			_	•
PD	<u>-</u>				t signature requirer			· <u></u>
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64 CITY-ST-ZIP  14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I fur		pod firsthal the left		6 4 CITY - ST	ZIP			

carriy 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 early 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.