2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H70144

Name:

Address: City-St-Zip: HALEY, KATHY

3820 TREASURE CR

PANAMA CITY, FL 32408

Entity Name: MELVA NEWBY LIQUORS, INC.

FILED Apr 28, 2009 Secretary of State

Current P	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
C/O MELV 8711 THOI PANAMA (MAS DR	FL 324084001			
Current Mailing Address:			New Mailing Address:		
C/O MELV 8711 THOI PANAMA (MAS DR	FL 324084001			
FEI Number:	: 59-2574341	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
PANAMA (NWOOD CIR CITY BEACH, named entity		ourpose of changing its registered	d office or registered agent, or both,	
	e of Florida.				
SIGNATUR		nic Signature of Registered Age	ont	 Date	
Election Car		g Trust Fund Contribution ().	enii	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	MC VELGH, JO 308 GREENW		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	NEWBY, CHAR 8711 THOMAS		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	D () Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: CHARLOTTE NEWBY DS 04/28/2009