

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000019080

FILED
May 17, 2005
Secretary of State

Entity Name: TEQUILA SPIRITS ENTERPRISE, LLC

Current Principal Place of Business:

2880 B ROAD
LOXAHATCHEE, FL 33470

New Principal Place of Business:

Current Mailing Address:

2880 B ROAD
LOXAHATCHEE, FL 33470

New Mailing Address:

FEI Number: 42-1624699 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CLARK, DONNIE
2880 B ROAD
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: SANCHEZ, LIVIA F
Address: 13543 DOUBLETREE TRAIL
City-St-Zip: WELLINGTON, FL 33414

Title: MGRM () Delete
Name: SANCHEZ, RAMON III
Address: 7471 LANTANA ROAD
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SANCHEZ, LIVIA F
Address: 2280 B ROAD
City-St-Zip: LOXAAHTCHEE, FL 33470

Title: MGRM (X) Change () Addition
Name: SANCHEZ, RAMON III
Address: 2880 B ROAD
City-St-Zip: LOXAHATCHEE, FL 33470

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LIVIA F. SANCHEZ

MGRM

05/17/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date