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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # **L41949** (3)
1. Corporation Name
RIVAL LIQUOR STORE INC.



Principal Place of Business
**% EFRAIN RIVERA
184 NE 3RD AVE
MIAMI FL 33132**

Mailing Address
**% EFRAIN RIVERA
184 NE 3RD AVE
MIAMI FL 33132-2218**

3. Date Incorporated or Qualified **01/08/1990** 3a. Date of Last Report **02/26/1996**

4. FEI Number **65-0166007** Applied For Not Applicable

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

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

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

2. Principal Place of Business 2a. Mailing Address

21. **Same** 26. Suite, Apt. #, etc.

22. City & State 27. City & State

23. Zip Country 28. Zip Country

24. 25. 29. 30.

9. Name and Address of Current Registered Agent

**RIVERA, EFRAIN
1470 NE 123 ST
SUITE 902
MIAMI FL 33161**

10. Name and Address of New Registered Agent

81. Name **Jose SENA**

82. Street Address (P.O. Box Number is Not Acceptable) **184 NE 3rd Ave**

83. **Miami FL**

84. City **FL** 85. Zip Code **33132**

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 *[Signature]* DATE **5/1/97**

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reappointing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	1.1 TITLE
NAME	RIVERA, EFRAIN	1.2 NAME
STREET ADDRESS	1470 NE 123 ST	1.3 STREET ADDRESS
CITY-ST-ZIP	N MIAMI FL	1.4 CITY-ST-ZIP
TITLE	D	2.1 TITLE
NAME	ALLEY, CARL Q	2.2 NAME
STREET ADDRESS	1470 NE 123 ST A 902	2.3 STREET ADDRESS
CITY-ST-ZIP	N MIAMI FL	2.4 CITY-ST-ZIP
TITLE		3.1 TITLE
NAME		3.2 NAME
STREET ADDRESS		3.3 STREET ADDRESS
CITY-ST-ZIP		3.4 CITY-ST-ZIP
TITLE		4.1 TITLE
NAME		4.2 NAME
STREET ADDRESS		4.3 STREET ADDRESS
CITY-ST-ZIP		4.4 CITY-ST-ZIP
TITLE		5.1 TITLE
NAME		5.2 NAME
STREET ADDRESS		5.3 STREET ADDRESS
CITY-ST-ZIP		5.4 CITY-ST-ZIP
TITLE		6.1 TITLE
NAME		6.2 NAME
STREET ADDRESS		6.3 STREET ADDRESS
CITY-ST-ZIP		6.4 CITY-ST-ZIP

Jose Sena - President Change Addition

184 NE 3rd Ave

Miami FL, 33132-2218

Carl SENA - VP Change Addition

184 NE 3rd Ave

Miami FL, 33132

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******165.00 ****165.00**

14. I do 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 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 named, or on an attachment with an address.

SIGNATURE *[Signature]*

CR2E034 (9/96)

[Handwritten signature]
8/14/97