## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 06, 2004 08:00 AM Secretary of State

1. Entity Name	MENT # L97188 OUNT LIQUORS, INC.				Secretary of Stat
Principal Place of Business Mailing Address 14590 WALSINGHAM RD. LARGO, FL 33774 LARGO, FL 33774					O CORNE INDICE (INDICE CORNOL COE) DIGITI DI DILI KANDAN DIGITI DAVIN DERINGDA ILI RODRE
DO NOT WRITE IN THIS SPAC  5. Name and Address of Current Registered Agent				01092004 4. FEI Numbe 59-302	
NIEWIAROWSKI, ANTONI W. 100 GULF BLVD. BELLEAIR SHORES, FL 33786			DO NOT WRITE IN THIS SPACE		
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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and tide if applicable (NOTE Registered Agent signature required when reinstating)  DATE					
FILE NOW!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  9. Election Campaign Finan  Youst Fund Contribution.				.00 May Be led to Fees	U00000078555 02/02/04-00000 024 150 00
TOTLE NAME STREET ADDRESS CITY-SI-ZIP	OFFICERS AND DIRECT DP NIEWIAROWSKI, ANTONI W. 100 GULF BLVD. BELLEAIR SHORES, FL	CTORS			33, 95, 67 86630 <u>027</u> 130.00
THTLE NAME STREET ADDRESS CHTY-ST-ZIP	DST NIEWIAROWSKI, WINCENTA 100 GULF BLVD. BELLEAIR SHORES, FL			<u>-</u> .	
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12. I hereby certify that the information supplied with this filling does not quality 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					