


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 11, 2008 08:00 AM
Secretary of State

DOCUMENT # M0400000792 1. Entity Name SUPREME WINE AND SPIRITS, LLC	
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Principal Place of Business 5 CASTLETON STREET PLEASANTVILLE, NY 10570	Mailing Address P.O. BOX 167 PLEASANTVILLE, NY 10570
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DO NOT WRITE IN THIS SPACE



01302008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 13-4197979	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

TERRANOVA WINE & SPIRITS
 8036 NW 66TH STREET
 MIAMI, FL 33166

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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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PULLANO, TONY 5 CASTLETON STREET PLEASANTVILLE, NY 10570
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 02/20/08-80036-002 143.75

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE _____ Date _____ Daytime Phone # _____