

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M57192

Entity Name: LAS OLAS LIQUORS, INC.

FILED
Jan 15, 2009
Secretary of State

Current Principal Place of Business:

757 SE 17TH ST. #667
FT. LAUDERDALE, FL 33316 US

New Principal Place of Business:

Current Mailing Address:

757 SE 17TH ST. #667
FT. LAUDERDALE, FL 33316 US

New Mailing Address:

FEI Number: 65-0003573 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RYAN, KATHERINE
722 E LAS OLAS BLVD
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

RYAN, KATHERINE
757 SE 17TH STREET
#667
FT. LAUDERDALE, FL 33316 US

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: _____ 01/15/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: RYAN, KATHERINE MAY,
Address: 2441 SW 29TH WAY
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D () Delete
Name: RYAN, KATHERINE MAY,
Address: 2441 SW 29TH WAY
City-St-Zip: FORT LAUDERDALE, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: KATHERINE RYAN PRES 01/15/2009
Electronic Signature of Signing Officer or Director Date