

# 2001 UNIFORM BUSINESS REPORT (UBR)

007120 AF

DOCUMENT # M99000001257

1. Entity Name  
PASCO BEVERAGE GROUP, LLC

FILED

01 JAN 31 AM 10:08

Principal Place of Business  
C/O PASCO ACQUISITION, INC.  
400 NORTH TAMPA STREET  
TAMPA FL 33602

Mailing Address  
C/O PASCO ACQUISITION, INC.  
400 NORTH TAMPA STREET  
TAMPA FL 33602

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DO NOT WRITE IN THIS SPACE

Zip

Country

Zip

Country

4. FEI Number 59-3583663

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DOLINER, NATHANIEL L ESQ.  
% CARLTON FIELDS  
777 S. HARBOUR ISLAND BLVD.  
TAMPA FL 33602

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

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 \$50.00  
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
PEISER, ROBERT A  
326 LAKEWOOD DRIVE  
BLOOMFIELD HILLS MI 48308 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
WILSON, GEORGE  
413 NORTH WALTER DRIVE  
PLANT CITY FL 33567 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
ROBERT NORBERG  
1251 PRISTINE PLACE  
LUTZ, FL 33549 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
FOUTS, LOU  
EAST 34TH STREET, #18-C  
NEW YORK NY 10016 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
COLM LANIGAN  
667 MADISON AVENUE, 6th FLOOR  
NEW YORK, NEW YORK 10021 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR  
WILSON, GEORGE  
413 NORTH WALTER DRIVE  
PLANT CITY FL 33567 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
800003662818-0  
-02/09/01--01013--003  
\*\*\*\*\*50.00 \*\*\*\*\*50.00 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR  
FOUTS, LOU  
155 EAST 34TH STREET, APT. 18-C  
NEW YORK NY 10016 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

11. I 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 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 or trustee empowered to execute this report as required by Chapter 60B, Florida Statutes.

SIGNATURE:

*Robert A. Peiser* Robert A. Peiser

1/26/2001

877 895 3227

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (11/00)