

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000073510

FILED  
Jul 05, 2005  
Secretary of State

Entity Name: BUONISSIMO! BEVERAGE DISTRIBUTORS, INC.

## Current Principal Place of Business:

1846 CAPESIDE CIRCLE  
WELLINGTON, FL 33414

## New Principal Place of Business:

2005 INVERNESS GREENS DRIVE  
SUN CITY CENTER, FL 33573

## Current Mailing Address:

1846 CAPESIDE CIRCLE  
WELLINGTON, FL 33414

## New Mailing Address:

2005 INVERNESS GREENS DRIVE  
SUN CITY CENTER, FL 33573

FEI Number: 65-1064432

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NEVES, GERLADINE DAS  
1846 CAPESIDE CIRCLE  
WELLINGTON, FL 33414 US

## Name and Address of New Registered Agent:

NEVES, GERLADINE DAS  
2005 INVERNESS GREENS DRIVE  
SUNCITY, FL 33573 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: GERALDINE DAS NEVES

07/05/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete  
Name: NEVES, GERALDINE D  
Address: 1846 CAPESIDE CIRCLE  
City-St-Zip: WELLINGTON, FL 33414

Title: D ( ) Delete  
Name: NEVES, GERALDINE D  
Address: 1846 CAPESIDE CIRCLE  
City-St-Zip: WELLINGTON, FL 33414

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change ( ) Addition  
Name: NEVES, GERALDINE D  
Address: 2005 INVERNESS GREENS DRIVE  
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D (X) Change ( ) Addition  
Name: NEVES, GERALDINE D  
Address: 2005 INVERNESS GREENS DRIVE  
City-St-Zip: SUN CITY, FL 33573

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GERALDINE DAS NEVES

PRES

07/05/2005

Electronic Signature of Signing Officer or Director

Date