## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000001599

Entity Name: GOPI OF FLORIDA. INC

FILED Apr 01, 2006 Secretary of State

| Littly Name: GOPTOFT LORIDA, INC.   |   |                                 |   |  |                                      |  |
|---|---|---------------------------------|---|--|--------------------------------------|--|
| Current Principal Place of Business:                                      |   |                                 | New Prin                                    | New Principal Place of Business:   |                                      |  |
| 4425 BLICH<br>B1  | HTON RD   |                                 |   |  |                                      |  |
| OCALA, FL   | 34482   |                                 |   |  |                                      |  |
| Current Mailing Address:  |   |                                 | New Mail                                    | New Mailing Address:   |                                      |  |
| 4425 BLICHTON RD<br>B1<br>OCALA, FL 34482                                 |   |                                 |   | 1248 RIBBON RD.<br>JACKSONVILLE, FL 32259  |                                      |  |
| FEI Number: 59-3701331 FEI Number Applied For ( ) FEI N                   |   |                                 | FEI Number Not App                          | mber Not Applicable ( ) Certificate of Status Desired ( )                                |                                      |  |
| Name and Address of Current Registered Agent:                             |   |                                 | Name and                                    | Name and Address of New Registered Agent:  |                                      |  |
| LIQUOR AT THE MARKETPLACE<br>4425 BLICHTON RD<br>B1<br>OCALA, FL 34482 US |   |                                 | 1248 RÍBE                                   | PATEL, ATUL D S<br>1248 RIBBON RD.<br>JACKSONVILLE, FL 32259 US                          |                                      |  |
| The above in the State  |   | ubmits this statement for the p | urpose of changing                          | its registered   | office or registered agent, or both, |  |
| SIGNATURE: ATUL PATEL   |   |                                 |   | 04/01/2006   |                                      |  |
|   | Electroni   | c Signature of Registered Age   | nt  |  | Date                                 |  |
| Election Carr   | paign Financing   | Trust Fund Contribution ( ).    |   |  |                                      |  |
| OFFICERS  | AND DIRECT  | ORS:                            | ADDITIO                                     | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:   |                                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                               | P ()<br>PATEL, VIJAY<br>10823 WAHINE<br>JACKSONVILLE    |                                 | Title:<br>Name:<br>Address:<br>City-St-Zip: | P (X) Change ( ) Addition<br>PATEL, VIJAY<br>1861 W. WINDY WAY<br>JACKSONVILLE, FL 32259 |                                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                               | S ()<br>MOTIWALA, BH,<br>8019 SABLE CR<br>JACKSONVILLE  | EEK DR                          | Title:<br>Name:<br>Address:<br>City-St-Zip: | (  | ()Change ()Addition                  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                               | S ()<br>PATEL, A<br>4425 BLICHTON<br>OCALA, FL 344      |                                 | Title:<br>Name:<br>Address:<br>City-St-Zip: | (  | ()Change ()Addition                  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                               | VP ()<br>KAPADIA, VISPY<br>1197 BENTLEY<br>LEESBURG, FL | RD APT # 2                      | Title:<br>Name:<br>Address:<br>City-St-Zip: | (  | ()Change ()Addition                  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                               | S ()<br>NOBLE, MEHER<br>1197 BENTLEY<br>LEESBURG, FL    | RD APT #3                       | Title:<br>Name:<br>Address:<br>City-St-Zip: | (  | ( ) Change ( ) Addition              |  |

I hereby certify that the information supplied with this filing does not qualify for the 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: ATUL PATEL S 04/01/2006