2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000086443

Entity Name: BOOZE BROTHERS INC

FILED Apr 28, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
259 BAYW DESTIN, F	VINDS DRIVE FL 32541 US	;			
Current Mailing Address:			New Mailing Address:		
259 BAYV DESTIN, F	VINDS DRIVE FL 32541 US	;			
FEI Number	: 20-1195942	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of Ci	urrent Registered Agent:	Name and Address of	New Registered Agent:	
4475 LEGI BOX 40 DESTIN, F	WS, DANA C ENDARY DRIVE FL 32541 US e named entity so e of Florida.		ourpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
	Electroni	c Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () I KNOWLES, JUS 259 BAY WINDS DESTIN, FL 325	DRIVE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () WOOREN, CHRI 206 GRACIE LAI NICEVILLE, FL	NE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	T () I STEWART, MAT 306 PRIMROSE DESTIN, FL 325	CIRCLE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () HUDSON, WILLI 128 SCOTTSDAI MARYESTHER,	LE COURT	Title: Name: Address: 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 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: JUSTIN C KNOWLES P 04/28/2005