

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000014768

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: COCONUT WINE & SPIRITS III, INC.

**Current Principal Place of Business:**

4570 LYONS ROAD  
COCONUT CREEK, FL 33073 US

**New Principal Place of Business:**

**Current Mailing Address:**

4570 LYONS ROAD  
COCONUT CREEK, FL 33073 US

**New Mailing Address:**

FEI Number: 76-0790078

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BALDEO, SHARON  
4570 LYONS ROAD  
COCONUT CREEK, FL 33073 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PT (X) Delete  
Name: SINGH, JOAD  
Address: 5100 NW 98 DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: DVPS ( ) Delete  
Name: BALDEO, SHARON  
Address: 5100 NW 98 DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: DPS (X) Change ( ) Addition  
Name: BALDEO, SHARON  
Address: 5100 NW 98 DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: DT ( ) Change (X) Addition  
Name: DARREN, BALDEO  
Address: 5100 NW 98 TH DR  
City-St-Zip: CORAL SPRING, FL 33076

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: SHARON BALDEO

P

04/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date