## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

Electronic Signature of Registered Agent

## DOCUMENT# P05000119590

Entity Name: LIQUOR MASTER, INC.

FILED Jan 24, 2012 Secretary of State

Date

**New Principal Place of Business: Current Principal Place of Business:** 901 E SEMORAN BLVD 901 E SEMORAN BLVD APOPKA, FL 32703 APOPKA, FL 32703 **Current Mailing Address: New Mailing Address:** 14664 KRISTENRIGHT LN. 901 E SEMORAN BLVD ORLANDO, FL 32826 APOPKA, FL 32703 US FEI Number: 20-3438033 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SARRAN, ASHLY 14664 KRISTENRIGHT LN. ORLANDO, FL 32826 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:

## **OFFICERS AND DIRECTORS:**

Title:

Name: SARRAN, ASHLY

Address: 14664 KRISTENRIGHT LN.
City-St-Zip: ORLANDO, FL 32826 US

I hereby 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 all other like empowered.

SIGNATURE: ASHLY SARRAN P 01/24/2012