

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #P05000146953

1. Entity Name  
IBIS LIQUORS, INC.



Principal Place of Business  
10130 NORTH LAKE BLVD.  
WEST PALM BEACH, FL 33412 US

Mailing Address  
10130 NORTH LAKE BLVD.  
WEST PALM BEACH, FL 33412 US

**FILED**  
**Apr 09, 2007 08:00 A**  
**Secretary of State**



04032007 No Chg-P CR2E034 (11/05)

4. FEI Number  
20-3728109

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

PHILIPPE J BRIAN, P.A.  
205 WORTH AVENUE  
SUITE 303  
PALM BEACH, FL 33480

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT KURSTEINER, WALTER 7947 VIA VILLAGIO WEST PALM BEACH, FL 33412
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP KURSTEINER, DANIELE 7947 VIA VILLAGIO WEST PALM BEACH, FL 33412
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PHILIPPE J BRIAN 205 WORTH AVENUE SUITE 303 PALM BEACH, FL 33480
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U00000694518  
04/17/07-80021-013 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WALTER KURSTEINER

04-04-07

Date

561 3584314

Daytime Phone #