

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000050105

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

**Entity Name:** TOP SHELF LIQUOR WINE & CIGARS, INC.

**Current Principal Place of Business:**

915 LITHIA PINECREST RD  
BRANDON, FL 33511 US

**New Principal Place of Business:**

**Current Mailing Address:**

915 LITHIA PINCREST RD.  
BRANDON, FL 33511 US

**New Mailing Address:**

915 LITHIA PINECREST RD  
BRANDON, FL 33511 US

**FEI Number:** 20-4674738

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AMIN, BRIJESH J  
275 BAYSHORE BLVD  
UNIT 1408  
TAMPA, FL 33606 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

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** AMIN, BRIJESH J  
**Address:** 275 BAYSHORE BLVD UNIT 1408  
**City-St-Zip:** TAMPA, FL 33606 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:** BRIJESH AMIN

PRES

04/12/2011

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

\_\_\_\_\_  
Date