2004 FOR PROFIT CORPORATION

Feb 09, 2004 8:00 am **ANNUAL REPORT (AR) Secretary of State** DOCUMENT # P92000006059 1. Entity Name 02-09-2004 90054 025 ***150.00 UNIVERSAL LIQUORS IMPORTS, CORP. Principal Place of Business Mailing Address 2150 CORAL WAY 1470 CECILIA AVENUE 94012126 8TH FLOOR MIAMI FL 33145 CORAL GABLES FL 33146 2. Principal Place of Business 2007 DOUGUS CO 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) City & State Applied For City & State 4. FEI Number 65-0384813 $\mathcal{W}_{\mathcal{N}}\mathcal{M}$ Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RICARDO ARREGUI ARREGUI, RICARDO Street Address (P.O. Box Number is Not Acceptable) 1470 CECILIA AVENUE CORAL GABLES FL 33146 STE 700 1 Mash 8. The above named entity submits this tatement 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. RICARDO ARREDUI SIGNATURE FILE NOW!!! FEE IS \$150.90 \$5.00 May Be 9. Election Campaign Financing After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Addition NAME ARREGUI, RICARDO NAME 1470 CECILIA AVENUE STREET ADDRESS STREET ADDRESS CORAL GABLES FL 33146 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME ARREGUI, OLGA NAME STREET ADDRESS 1470 CECILIA AVENUE STREET ADDRESS CITY-ST-7IP CORAL GABLES FL 33146 CITY-ST-ZIP Change TITLE ☐ Delete TITLE Addition RICARDO M. ARREGUT. ARREGÜL RICARDO'U" NAME NAME STREET ADDRESS 2701 SEGOVIA AVENUE STREET ADDRESS 2205 SW 28 ST COCONUT GROVE, FL 3313> CITY-ST-ZIP **CORAL GABLES FL** CITY-ST-ZIP Delete TITLE TITLE Chaone Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-7IP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report on 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 by 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 article with all other like empowered.

FILED

RICHARD ARRESUL SIGNATURE: