## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FT LAUDERDALE FL 33316

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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## DOCUMENT # P93000024238 (6)

Country

9. Name and Address of Current Registered Agent

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RADUENZEL, JULIANA 2915 E LAS OLAS BLVD

FT LAUDERDALE FL 33316

JRO LIQUORS, INC.

FT LAUDERDALE FL 33316

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

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Zip

Principal Place of Business Mailing Address % PLAZA LIQUORS % PLAZA LIQUORS 2915 E LAS OLAS BLVD 2915 E LAS OLAS BLVD

## **FILED** Jan 28 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/25/1993 4. FEI Number Applied For 65-0399692 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Yes Yes □ No Personal Property Tax due June 30. 10. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable)

Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of chariging its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered

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Country

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agent. I a	m familiar with, and accept the obligations of	of, Section 607.0505, Fl	orida Statutes.		-	
SIGNATURE	Signature typed or printed name of registered agent and till	a if applicable. (NO)	E: Registered Agent signature required w	/hen reinstating)	DATE	
12. OFFICERS AND DIRECTORS			13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	DELETE	1.1 TITLE		Change	Additio
NAME	RADUENZEL, JULIANA		1.2 NAME			
STREET ADDRESS	% 2915 E LAS OLAS BLVD		1.3 STREET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE FL 33316		1.4 CITY-ST-ZIP			
TITLE	-	DELETE	2.1 TITLE		Change	Additio
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY - ST - ZIP			2. 4 CITY-ST-ZIP		٠.	
TITLE		DELETE	3.1 TITLE		☐ Change	Additio
NAME			3.2 NAME			
STREET AODRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. GITY-ST-ZIP			
TITLE		L☐ DELETE	4.1 TITLE		☐ Change	Additio
NAME			4. Z NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY+ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
OFF ST 715			CACITY OF 71D			

14. 1 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.