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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 24 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # **P93000037705 (9)**

GRANADA LIQUORS, INC.

Principal Place of Business Mailing Address						—{		
4201 S.W. 11TH MIAMI FL 33134	1 STREET	4201 S.W. 11TH 8	1201 S.W. 11TH STREET MIAMI FL 33134-2708					
						3. Date Incorporated or Qualified 05/26/1993	3a. Date of Last R 07/02/1996	eport
·······	lace of Business	2a. Mailing Addr	ess			4, FEI Number	Ar	plied For
21	A	26				65-0415047		t Applicable
Suite, Apt	#, etc	Suite, Apt. #,	eic.			6. Certificate of Status Desired	\$8.75	Additional
City & State	9	City & State	<u> </u>			6. Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution	☐ Added i	
Zip	Country	Zip	Country			8. This corporation has liability for intangible tax under s. 199.032,		
24	25 29 30				Florida Statutes Yes No			
OAD!	9. Name and Address of Curre	nt Registered Agent		81	Name	10, Name and Address of New Rec	Istered Agent	
	rera, raul d I s.w. 11th street			[8]	name			
		82 Street Add			ess (P.O. Box Number is Not Acceptable	e)		
MINA	VII FL 33134		83					
				84	City		FL 85 Zip (	Code
11, Pursuant t	to the provisions of Sections 607.05	02 and 607.1508, Florid	la Statutes.	the above	-named corp	poration submits this statement for the po	proose of changing it	s registered
office or ri agent. Lai	egistered agent, or both, in the Stat m familiar with, and accept the oblid	e of Florida. Such chan gations of, Section 607.	ge was auth 0505, Florida	iorized by a Statutes	the corporat	ion's board of directors. I hereby accep	the appointment as	registered
SIGNATURE			·					
	Signature, typied or printed name of registered as		(NOTE Fle	·	ni signature requir	red when reinstating)	DATE	
12.	OFFICERS AT	ND DIRECTORS DE	CTE	13.		ADDITIONS/CHANGES TO OFFICE		
TITLE NAME	GRANDA, GLADYS R	L DE	LEIE	1.1 TITLE			☐ Change	Addition
STREET ADDRESS	4821 SW 8TH STREET			1.2 NAME	I D D D C C C			
CHY-ST-ZIP	MIAMI FL 33134			1.3 STREET				
TITLE		DE	LETE	1.4 CITY-ST 2.1 TITLE	1-2117		Change	Addition
NAME		<del>_</del>		2.2 NAME				
STREET ADDRESS				2.3 STREET	ADDRESS			
CITY-ST-ZIP				2. 4 CITY-S	T-ZIP			
TITLE		DE	LETE	3.1 TITLE			Change	Addition
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREET	ADDRESS			
CITY-ST-ZIP		<b>—</b>		3.4 CITY-S	T-ZIP			
TITLE		L.) DE	LETE	4.1 TITLE			Change	☐ Addition
NAME				4. 2 NAME				
STREET ADDRESS				4.3 STREET				
CITY-ST-ZIP TITLE		DE	FTF	4.4 CITY-ST	r-zip		☐ Change	Addition
NAME		DE	CCIL	5.1 TITLE 5.2 NAME			LT Change	☐ Addition
STREET ADDRESS				5.3 STREET	ADDRECE			
CITY-ST-ZIP				5.4 CITY-ST				
TITLE		DE	LETE	61 TITLE	1 ' 211'		Change	☐ Addition
NAME				6 2 NAME				
STREE1 ADDRESS				6.3 STREET	ADORESS			
CITY - ST - ZIP				6.4 CITY-ST				
14. I do heret	by certify that the information supply	ed with this filing does r	not qualify fo	r the exer	mption stated	in Section 119.07(3)(i), Florida Statutes my signature shall have the same legal	. I further certify that	the
I am an of appears in	flicer or director of the corporation on Block 12 or Block 23 of changed, a	or the receiver or trustee or on an attachment wit	empowere n an addres	d to execus.	ute this repor	t as required by Chapter 607, Florida St	atutes; and that my n	ame