2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P93000067912 **DOCUMENT #**

1. Entity Name

SIGNATURE:

COLLINS LIQUOR STORE, INC.



FILED Jan 16, 2003 8:00 am Secretary of State 01-16-2003 90051 033 ***150.00

Principal Pla 2013-961-11 MIAMI BEAC	H FL 33139	317-7319	7 2012-0	Address OLLING AVE BEACH FI 33139	77	317-	-73 ni	19 BCI	7. F		 33	77 17	v		
2. Principal	Place of Busin	NAMI BO		ng Address											
Suite, Ap	t. #, etc.	Suite	Suite, Apt. #, etc.					Пс	HECK LIED	E IE KAAL	INC OU	NOTO			
City & Sta	ite	City 6	City & State				4. FEI Number 65-0439327 Ap						pplied For		
Zip Country			Zip	, , , , , , , , , , , , , , , , , , , ,			5. Certificate of Status Des				Not Applicable				ole
	6. Name	and Address of Cur	rent Registered	Agent	L			7. Nan	ne and Addre	ss of New	Register				_
FELDMAN	N, DAVID ES	٥				Name						ed Ageill			7
	OLN RD PH ACH FL 331					Street Address (P.O. Box Number is Not Acceptable)									
					City						Z Z	ip Cod	 le		
8, The above the obligation	named entity tions of registe	submits this stateme ered agent.	nt for the purpo	se of changing its	registere	ed office or	registered	d agent,	or both, in the	State of F	lorida. La	am familia	r with,	and accep	rt .
SIGNATURE	Signature, typed o	r printed name of registered a	gent and title if applic	able. (NOTE	Begistered	d Agent signatur	to required wh				DAT				
Afte	r May 1, 2003	FEE IS \$150.00 3 Fee will be \$550. Florida Departmen	00 nt of State							Contribution	on,	L	Added	0 May Be	
TITLE	DVSP	OFFICERS A	IND DIRECTOR		11.			ADDIT	IONS/CHANG	ES TO OF	FICERS A	ND DIRE	CTORS	3 IN 11	┚_
NAME STREET ADDRESS CITY-ST-ZIP	TAAZIEH, FADI			∟ Delete		NAME STREET ADDRESS CITY-ST-ZIP						☐ CI	iange	☐ Additio	SR2E034 (10/02)
	DV TAAZIEH, CAROLINE 2012 COLLINS AVE MIAMI BEACH FL 33139			, M		TITLE NAME STREET ADDRESS CITY-ST-ZIP		.		,		□ Cr	1ange	☐ Addition	CRZE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	·			☐ Delete	TITLE NAME	ADDRESS						☐ Cha	ange	Addition	
ITLE IAME STREET ADDRESS ITTY-ST-ZIP				□ Delete	TITLE NAME STREET CITY-S	ADDRESS				#··		☐ Cha	inge	Addition	
ITLE IAME TREET ADDRESS ITY-ST-ZIP	<u></u>			☐ Delete	CITY-S							☐ Cha	•	Addition	
of the corp	oration or the a	nformation supplied w or supplemental report receiver or trustee em ment with an address	powered to eve	outo this reserve	ne exemp signatur required	ption stated e shall have d by Chapte	I in Section the samer 607, Flo	n 119.0 e legal orida Sta	7(3)(i), Florida effect as if ma atutes; and tha	Statutes. I de under o at my name	further coath; that less appears	ertify that am an of in Block	the info ficer or 10 or E	ormation r director Block 11 if	1