

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT .**

**FILED**  
**Feb 12, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # P93000072939**

1. Entity Name  
**KRYSTALS LIQUORS, INC.**



Principal Place of Business  
**KRYSTALS LIQUORS INC  
7105 W 12TH AVE #1  
HIALEAH, FL 33014 US**

Mailing Address  
**KRYSTALS LIQUORS INC  
7105 W 12TH AVE #1  
HIALEAH, FL 33014 US**



02022007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-0444949</b>	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

**6. Name and Address of Current Registered Agent**

**HURTADO, GABRIEL  
17034 SW 39TH COURT  
MIRAMAR, FL 33027**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS HURTADO, GABRIEL 17034 SW 39TH COURT MIRAMAR, FL 33027
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT HURTADO, MARIA D 17034 SW 39TH COURT MIRAMAR, FL 33027
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02/20/07-80014-004-150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or 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 or 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 address, with all other like empowered.

**SIGNATURE:** Madel R. L. Hurtado  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 10/08/07  
Date Daytime Phone #