

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 25, 2007 8:00 am**  
**Secretary of State**

01-25-2007 90038 019 \*\*\*150.00

**DOCUMENT # P94000064669**

1. Entity Name  
**BEVERAGE CORPORATION OF FLORIDA, INC.**



Principal Place of Business  
**8528 NW 66TH ST  
MIAMI, FL 33166**

Mailing Address  
**8528 NW 66TH ST  
MIAMI, FL 33166**

**60006558**

2. Principal Place of Business - No P.O. Box #

**9092 NW South River Dr.**

3. Mailing Address

**9092 NW South River Dr.**

Suite, Apt. #, etc. -

**Bay 52**

Suite, Apt. #, etc. -

**Bay 52**

City & State

**Medley, FL**

City & State

**Medley, FL**

Zip

**33166**

Country

**US**

Zip

**33166**

Country

**US**

01222007- - Chg-P - - CR2E034 (12/06)

4. FEI Number  
**65-0515860**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**PEREZ, FERMIN JR.  
871 SW 124TH CT  
MIAMI, FL 33184**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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]*  
(Signature, typed or printed name of registered agent and type if applicable)

(NOTE: Registered Agent signature required when re-registering)

**01/22/07**  
DATE

**FILE NOW!!! FEES \$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 **P** ☒ Delete  
NAME **PEREZ, FERMIN JR.**  
STREET ADDRESS **871 SW 124TH CT**  
CITY-ST-ZIP **MIAMI, FL 33166**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Change ☒ Addition  
NAME **Diaz, Sarahi**  
STREET ADDRESS **871 SW 124 Court**  
CITY-ST-ZIP **Miami, FL 33184**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**01/24/07**  
Date

**305-710-6627**  
Daytime Phone #