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

P95000006281 (6) DOCUMENT

CARIBBEAN GARDENS LIQUORS, INC.

FILED May 20 1998 8:00am Secretary of State



Principal Place	or business	Mailing Address	Maning Address						
5713 HALLAN HOLLYWOOD	DALE BEACH BLVD. FL 33023	5713 HALLANDALE BEAC HOLLYWOOD FL 33023	5713 HALLANDALE BEACH BLVD. HOLLYWOOD FL 33023						
						DO NOT WRITE IN THIS SP	ACE		
						3. Date Incorporated or Qualified			
		A Mayon Address				01/25/1995 4. FEI Number	$\overline{}$	Applied For	
— `	ace of Business	· · · · · ·	2a. Mailing Address					Not Applicable	
21	4 -1-	26 Cuito Ant # ato	Suite, Apt. #, etc.			65-0566924	4		
Suite, Apt		27 Suite, Apr. #, etc.	27			5. Certificate of Status Desired	te of Status Desired S8.75 Additional Fee Required		
City & State		City & State	 1			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country 25	Zip	30 Cou	intry	,	This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
24	9. Name and Address of C	urrent Registered Agent	1901			10. Name and Address of New Registered Agent			
110				81	Name				
MATOS, JUSTO R 5713 HALLANDALE BEACH BLVD.				82	Street Addr	et Address (P.O. Box Number is Not Acceptable)			
НО	LLYWOOD FL 33023			83					
				84	City		85 Zip	p Code	
					L	<u> </u>	بلبا	11 11 11	
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 changing its register 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 register agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
	THE PROPERTY OF THE CONTRACT OF THE	on gament of account of the option							
SIGNATURE	Signature, typed or printed name of register	red agent and title if applicable (NOT	£ Registere	d Aga	niuper erulangka kre	red when reinstating) DATE			
12.	OFFICER	S AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND I			
TITLE	D	☐ DELETE	LETE 11 TITL			L.	Change	Addition	
NAME	MATOS, JUSTO R		1.2 NAME					li	
STREET ADDRESS	5713 HALLANDALE BEA	CH BLVD.	1.3 \$1	TAEET	ADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL 33023		1.4 CITY-		ST-ZIP				
TITLE		☐ DELETE	2 1 TITLE		[L	Change	Addition (
NAME			2 2 NA						
STREET ADDRESS			2351	TREET	ADDRESS				
CITY-ST-ZIP					ST-ZIP				
TITLE		☐ DE LETE	☐ DĒLĒTE 3.1 TI			L	Change	e L Addition	
NAME			3.2 N	AME					
STREET ADDRESS			3.3 ST	TREET	ADDRESS				
CITY-ST-ZIP			3.4. 0	ITY - S	ST-ZIP				
TITLE		DELETE	4.1 TI	TLE		Į	Change	e L Addition	
NAME			4. 2 N	AME	-				
STREET ADDRESS			4.3 ST	TREET	ADDRESS				
CITY-ST-ZIP			4.4 CI	ITY-S	ST- ZIP				
TITLE		☐ DELETE	5.1 TI	TLE	l	L	Change	e 🔲 Addition	
NAME			5.2 N	AME					
STREET ADDRESS			5.3 S	TREET	ADDRESS				
CITY-ST-ZIP			5.4 CI	ITY-S	ST - ZIP				
TITLE		DELETE	6.1 71	TLE			Change	e Addition	
NAME			6.2 N	AME					
STREET ADDRESS			6.3 S	TREET	ADDRESS				
CITY-ST-ZIP					ST-ZIP				
14 I hereby o	ertify that the information suppl	lied with this filing does not qualify f				Section 119.07(3)(i), Florida Statutes. I further cert	ify that t	he information	

indicated on this annual report or supplied that has ning doos for quality in the exemptor stated in declared in the sample feet as if made under oath; that I am an officer or director of the corporation or the receiver or trustee environmental enter this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if granged, or on an attachment wing an address.