

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 04, 2002 8:00 am**  
**Secretary of State**

02-04-2002 90027 039 \*\*\*150.00

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**DOCUMENT # P95000006281**

1. Entity Name  
**CARIBBEAN GARDENS LIQUORS, INC.**

Principal Place of Business Mailing Address  
**5713 HALLANDALE BEACH BLVD. 5713 HALLANDALE BEACH BLVD.**  
**HOLLYWOOD FL 33023 HOLLYWOOD FL 33023**



2. Principal Place of Business 3. Mailing Address  
 Suite, Apt. #, etc. Suite, Apt. #, etc.  
 City & State City & State

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0566924** Applied For Not Applicable  
 5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**TERMINELLO, LOUIS J ESQ**  
**TERMINELLO & TERMINELLO, P.A.**  
**2700 S.W. 37TH AVE**  
**MIAMI FL 33133**

7. Name and Address of New Registered Agent  
 Name **LANDIVAR, YELITZA**  
 Street Address (P.O. Box Number is Not Acceptable) **5713 HALLANDALE BEACH BLVD.**  
 City **HOLLYWOOD FL** Zip Code **33023**

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.  
 SIGNATURE *Landivar Seibam* **LANDIVAR, YELITZA** **JANUARY 14, 2001**  
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.   
**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PVST</b> <b>MOLINARI, MARIO</b> <b>5713 HALLANDALE BEACH BLVD.</b> <b>HOLLYWOOD FL 33023</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PVST</b> <b>LANDIVAR, YELITZA</b> <b>5713 HALLANDALE BEACH BLVD.</b> <b>HOLLYWOOD, FL 33023</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Landivar Seibam* **LANDIVAR, YELITZA** **JANUARY 14, 2001**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)