FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address 761 N. ORANGE AVENUE

WINTER PARK FL 32789-4703

PROFIT CORPORATION ANNUAL REPORT

1997

Principa! Place of Business

761 N. ORANGE AVENUE WINTER PARK FL 32789



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000042217 (6)

LIQUOR WORLD EIGHT, INC.

appears in Block 12 or Block 19 if

SIGNATURE:

3. Date Incorporated or Qualified 3a. Date of Last Report 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 59-3319426 26 Not Applicable Suite, Apt #, etc Suite Ant. #. ntc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State Crty & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name YONG W. LEE 8903 LATREC AVE #108 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32819 83 84 Zip Code 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 registered 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 registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURI Signature, typed or printed name of registerud agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 12. OFFICERS AND DIRECTORS 13. Addition DELETE 1.1 TITLE Change TIFLE D LEE. YONG W 1.2 NAME NAME 8903 LATREC AVE #108 STREET ADDRESS 1.3 STREET ADDRESS 3281 Orlando Fl 1.4 CITY-SY-ZIP CITY - S1 - ZIP Addition DELETE Change 2.1 TITLE TitleE 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CI1Y-S1-ZIP 2. 4 City-ST-ZIP ☐ DELETE ☐ Change Addition THILE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIF 3 4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE THEF 4. 2 NAME 4.3 STREET ADDRESS STREET ADORESS 4.4 CITY-ST-ZIP CITY: \$1-Zif Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME **53 STREET ADDRESS** STREET ADDRESS 5.4 CITY-ST-ZIP CITY ST-ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-7IP 6.4 CITY-ST-ZIP 14. Loo 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 annual report or supplemental annual 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 12 or Block 13 if phanged, or on an attachment with an address.

FILED May 09 1997 8:00am Secretary of State

