

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 13, 2000 8:00 am**  
**Secretary of State**

06-13-2000 90054 012 \*\*\*150.00

DOCUMENT # P 95000071356

1. Entity Name  
**CDC LIQUORS, INC.**  
**5653-55 SW 8 ST.**  
**MIAMI, FL. 33134**

Principal Place of Business  
**5653-55 SW 8<sup>th</sup> ST.**  
**MIAMI, FL. 33134**

Mailing Address  
**5655 SW 8 ST.**  
**MIAMI, FL. 33134**

2. Principal Place of Business  
**5655 SW 8<sup>th</sup> STREET**

3. Mailing Address  
**5655 SW 8<sup>th</sup> STREET**

City & State  
**MIAMI, FL.**

City & State  
**MIAMI, FL.**

Zip  
**33134**

Country  
**USA**

4. FEI Number  
**65-0617467**

Applied For  
☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☒ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP

**D ROLLO, CARMAN** ☐ Delete  
**5653-55 SW 8 ST.**  
**MIAMI, FL. 33134**

TITLE NAME STREET ADDRESS CITY-ST-ZIP

**D DROPKIN, MAY** ☐ Delete  
**5653-55 SW 8 ST.**  
**MIAMI, FL. 33134**

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

*Please note:  
 there are no changes  
 to last year's filing  
 I thank you*

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: *[Signature]* **4/27/00** **705 670 0161**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

P95000071356

Attachment to  
660925

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Bottoms Up

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4/18/00 CORPORATE DETAIL RECORD SCREEN 4:45 PM  
NUM: P95000071356 ST:FL ACTIVE/FL PROFIT FLD: 09/15/1995  
FEI#: 65-0617467  
NAME: CDC LIQUORS, INC.  
PRINCIPAL: 5653-55 S.W. 8TH STREET CHANGED: 05/06/97  
ADDRESS MIAMI, FL 33134 US  
RA NAME : ROLLO, CARMAN  
RA ADDR : 5653-55 S.W. 8TH STREET ADDR CHG: 05/06/97  
MIAMI, FL 33134 US  
ANN REP : (1997) BN 05/06/97 (1998) B 04/13/98 (1999) AN 04/22/99

4/18/00 OFFICER/DIRECTOR DETAIL SCREEN 4:46 PM  
CORP NUMBER: P95000071356 CORP NAME: CDC LIQUORS, INC.  
TITLE: D NAME: ROLLO, CARMAN  
5653-55 S.W. 8TH STREET  
MIAMI, FL  
TITLE: D NAME: DROPKIN, MAY  
5655 SW 8TH STREET  
MIAMI, FL 33134