## 2006 FOR PROFIT CORPORATION

## **Secretary of State** ANNUAL REPORT 02-06-2006 90068 040 \*\*\*150.00 **DOCUMENT # P97000019576** DEMERARA DISTILLERS (USA) INC. 60012235 Principal Place of Business Mailing Address 815 NW 57TH AVENUE #201 1837 SOUTH STATE ROAD 7 FORT LAUDERDALE, FL 33317 US MIAMI, FL 33126 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01192006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 58-2325202 Not Applicable Zio Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name RAMCHERITAR, NARINA Street Address (P.O. Box Number is Not Acceptable) 1837 SOUTH STATE ROAD 7 FORT LAUDERDALE, FL 33317 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DC TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME PERSAUD, YESU NAME STREET ADDRESS 44B HIGH ST., KINGSTON GEORGETOWN STREET ADDRESS CITY-ST-ZIP GUYANA, SOUTH AMERICA, CITY-ST-ZIP DP TITLE ☐ Delete TITLE Change Addition SAMAROO, KOMAL R NAME NAME STREET ADDRESS 44B HIGH ST., KINGSTON GEORGETOWN STREET ADDRESS CITY-ST-ZIP GUYANA, SOUTH AMERICA, CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NATHOO, LORIS NAME NAME STREET ADDRESS 44B HIGH ST KINGSTON GEORGETOWN STREET ADDRESS CITY-ST-ZIP GUYANA SOUTH AMERICA, CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME LYE, PAULA NAME STREET ADDRESS 815 NW 57TH AVENUE #201 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33126 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME

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.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

STREET ADDRESS

STREET ADORESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

Delete

☐ Change

☐ Addition

FILED Feb 06, 2006 8:00 am