

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000054945

1. Entity Name

CENTURY WINE & LIQUORS CORPORATION

FILED
Apr 25, 2000 8:00 am
Secretary of State

04-25-2000 90146 039 ***150.00

Principal Place of Business

Mailing Address

11425 SW 40 ST
MIAMI FL 33165

11425 SW 40 ST
MIAMI FL 33165-3311

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
MIAMI FL

City & State

Zip
33165

Country
DADE

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0767742

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RATON, LUIS
CORAL PARK SHOPPING CENTER
9800 SW 8TH ST., SPACE # 14
MIAMI FL 33174

Name LUIS RATON

Street Address (P.O. Box Number is Not Acceptable)
2141 SW 126 ST

City MIAMI

FL

Zip Code 33175

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

LUIS RATON (PRESIDENT)

4/17/00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DST
NAME RATON, MIRIAM
STREET ADDRESS 11425 SW 40 ST
CITY-ST-ZIP MIAMI FL 33165 ☐ Delete

TITLE RATON MIRIAM
NAME RATON MIRIAM
STREET ADDRESS 11437 SW 40 ST
CITY-ST-ZIP MIAMI FL 33165 ☒ Change ☐ Addition

TITLE DP
NAME RATON, LOIS
STREET ADDRESS 11425 SW 40 ST
CITY-ST-ZIP MIAMI FL 33165 ☐ Delete

TITLE RATON LUIS
NAME RATON LUIS
STREET ADDRESS 11437 SW 40 ST
CITY-ST-ZIP MIAMI FL 33165 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

LUIS RATON 4/17/00 305-220-9081
PRESIDENT

CR2E034 (9/99)