

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000036042

Entity Name: ISLAND LIQUORS SALES, INC.

FILED  
Aug 17, 2004  
Secretary of State

## Current Principal Place of Business:

10130 NORTHLANE BLVD  
SUITE 200  
WEST PALM BEACH, FL 33412

## New Principal Place of Business:

## Current Mailing Address:

2592 SW LONGBOAT WY  
PALM CITY, FL 34990

## New Mailing Address:

5004 SW SAINT CREEK DRIVE  
PALM CITY, FL 34990

FEI Number: 65-0834420

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DOLD, JAMES  
2592 SW LONGBOAT WAY  
PALM CITY, FL 34990 US

## Name and Address of New Registered Agent:

DOLD, JAMES D  
5004 SW SAINT CREEK DRIVE  
PALM CITY, FL 34990 US

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: JAMES DOLD

08/17/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DOLD, JAMES  
Address: 2592 SW LONGBOAT WY  
City-St-Zip: PALM CITY, FL 34990

Title: VD ( ) Delete  
Name: DOLD, THERESA  
Address: 2592 SW LONGVBOAT WAY  
City-St-Zip: PALM CITY, FL 34990

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: DOLD, JAMES D  
Address: 5004 SW SAINT CREEK DRIVE  
City-St-Zip: PALM CITY, FL 34990

Title: VD (X) Change ( ) Addition  
Name: DOLD, THERESA M  
Address: 5004 SW SAINT CREEK DRIVE  
City-St-Zip: PALM CITY, FL 34990

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES DOLD

PD

08/17/2004

Electronic Signature of Signing Officer or Director

Date