2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # \$63431 1. Entity Name COMPANIA DE LICORES INTERNACIONALES, INC.					Apr 24, 2002 8:00 am Secretary of State 04-24-2002 90398 034 ***158.75			
Principal Place of Business 921 PIZARRO ST CORAL GABLES FL 33134		Mailing Address PO BOX 14-4427 CORAL GABLES FL 33114-4427						
COUNT GADE	12 12 00104	CONTRACTOR OF STATE STAT	***					
2. Principal P	Place of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City & State			4. FEI Number	 6 5- 0344931		pplied For ot Applicable
Zip	Country	Zip	Country		5. Certificate of St	atus Desired 🛚 🛣	\$8.75 Add	litional
	6. Name and Address of Current R	tegistered Agent			7. Name and Add	ress of New Registere	d Agent	
- ROBERTS, WILLIAM J - 217 S ADAMS ST - TALLAHASSEE FL 32301				ABASCAL, G. AURELIO Street Address (P.O. Box Number is Not Acceptable) 575 Crandon Blvd. Apt. 512				
.,			City	Кеу В	iscayne	F	L Zip Cod	
8. The above	named entity submits this statement for	the purpose of changing its re	egistered office	or registere	d agent, or both, in	the State of Florida.	•	
SIGNATURE .	Cashalal	G.AURELI	O ABASCA	AL Se	cretary	April	10, 2002	2
ordina irone .	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOTE: I	Registered Agent sig	nature required w	vhen reinstating)	DATE		
Tax filing requirement and elects to do so After May 1,		FILE NOW!!! After May 1, 2002 Make Check Payable	Fee will be	\$550.00	Trust Fu	Campaign Financing and Contribution.		May Be I to Fees
11.	OFFICERS AND D	DIRECTORS	12.	,	ADDITIONS/CHA	NGES TO OFFICERS A	ND DIRECTOR	S IN 11
TITLE	PT	☐ Delete	TITLE				Change	Addition
NAME	ABASCAL, GERARDO		NAME					
STREET ADDRESS CITY-ST-ZIP	GPO BOX 364094 SAN JUAN, PUERTO RICO		STREET ADDRES	S				ļ
				s			X Change	[7] Addition
NAME	S ABASCAL, AURELIO G	☐ Delete	NAME	ABASO	CAL, G. Aur		Address	Addition
STREET ADDRESS CITY-ST-ZIP	GPO BOX 364694		STREET ADDRES		Giscayne, E	rd. Apt. 512 L 33149		
	SAN JUAN, PUERTO RICO		TITLE	111111	orscayiic, i	L	Change	☐ Addition
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NAME			NAME					
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TITLE		☐ Delete	TITLE				☐ Change	☐ Addition
NAME			NAME					}
STREET ADDRESS			STREET ADDRES	s				
CITY-ST-ZIP			CITY-ST-ZIP		6 440 07/03/03 E	and Orange 17 of		.f = =
indicated of the cor	certify that the information supplied with to on this report or supplemental report is to poration or the receiver or trustee empoyor or on an attackment with an address with a contract of the contract of t	rue and accurate and that my vered to execute this report as	signature sha s required by C	II have the sa	ame legal effect as i	f made under oath; that d that my name appear	I am an officer	or director

SIGNATURE:

GERARDO ABASCAL President

April 10,2002(305)510-4344

Daytime Phone #