

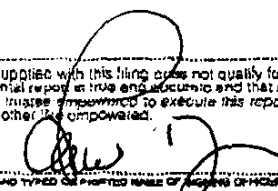
FROM : AE UNDERBERG, ATTY

FAX NO. : 727 8232347

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90290 036 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 586825			
1. Entity Name: KRESCI LIQUORS, INC. DBA DOGWATER CAFE			
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 3611 W. Hillborough Ave Suite, Apt. #, etc. 200		3. Mailing Address 2961 LANDMARK WAY Suite, Apt. #, etc.	
City & State Tampa FL		City & State Palmdale, FL	
Zip 33614 County Hillborough		Zip 34684 County Pinellas	
4. FEI Number 59-3100009		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent			
Name Tom Bryant			
Street Address (P.O. Box Number is Not Acceptable) 4250 S. Florida Ave Suite 2			
City LAKELAND FL Zip Code 33802			
DO NOT WRITE IN THIS SPACE			
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 _____		DATE _____	
Fees: MAY 1 Fee is \$150.00 Annual Fee is \$150.00 Amended UBR is \$61.25 Along with Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE	President	TITLE	
NAME	Lee W Kresci	NAME	
STREET ADDRESS	2961 LANDMARK WAY	STREET ADDRESS	
CITY-ST-ZIP	PALM HARBOR, FL 34684	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(2)(D), 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 on an attachment with an address, with all other the empowered.			
SIGNATURE: 		4/28/03 813-877-5241	