

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000064068

Entity Name: SHORES LIQUOR LLC

Current Principal Place of Business:

14630 PALM BEACH BLVD
SUITE 1
FORT MYERS, FL 33905

Current Mailing Address:

14630 PALM BEACH BLVD
SUITE 1
FORT MYERS, FL 33905

FEI Number: 27-0485046

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

N AIK, CHANDRAJEET R
7570 SIKI DEER WAY
FORT MYERS, FL 33966 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGRM
Name NAIK, CHANDRAJEET R
Address 7570 SIKI DEER WAY
City-State-Zip: FORT MYERS FL 33966

Title MGRM
Name RATHOD, SUVARNA M
Address 146 EAST NORTSHORE AVE
City-State-Zip: NORTH FORT MYERS FL 33917

Title AMBR
Name PATEL, ASHISH
Address 5050 WEST 107TH CT
City-State-Zip: WESTMINISTER CO 80031

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHANDRAJEETNAIK

MANAGING MEMBER

04/22/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date