


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2007 08:00 AM
Secretary of State

DOCUMENT # F04000007201		
1. Entity Name PROSPERO WINERY, INC.		
Principal Place of Business 134 MARBLE AVE. PLEASANTVILLE, NY 10570	Mailing Address 134 MARBLE AVE. PLEASANTVILLE, NY 10570	



07052007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 13-4030929	Applied For Not Applicable
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5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

AVINYA DISTRIBUTORS, INC.
7575 KINGSPINTE HWY SUITE 23
ORLANDO, FL 32819

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P PROSPERO, TONY 4 FAIRWAY DRIVE PLEASANTVILLE, NY 10570
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP PROSPERO, PASQUALE 5 MEADOW HILL CT. THORNWOOD, NY 10594
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S PROSPERO, SILVANA 4 FAIRWAY DR. PLEASANTVILLE, NY 10570
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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07/10/07-80021-009 558.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Shawn Profero (Secretary)*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #