

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
55 FEB 22 AM 9:51

DOCUMENT # F93000001217 (9)

1. Corporation Name

CODERA WINE GROUP, INC.

Principal Place of Business

Mailing Address

1335 STANFORD AVE
500
EMERYVILLE CA 94608
US

1335 STANFORD AVE
500
EMERYVILLE CA 94608
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/23/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

94-3130839

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. The corporation has liability for intangible tax under S. 190.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEVEQUE, PATRICK
2210 NW 29TH ST.
FT. LAUDERDALE FL 33311

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and the filer (Applicable)

Signature typed or printed name of registered agent and the filer (Applicable)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVP
BENHAM, DEREK
1335 STANFORD AVE #500
EMERYVILLE CA

1. TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
BENHAM, DEREK
1335 STANFORD AVE #500
EMERYVILLE CA

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
BENHAM, COURTNEY
1335 STANFORD AVE #500
EMERYVILLE CA

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
COO
STEVEN K. GOMBERG
1335 STANFORD AVE #500
EMERYVILLE CA

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP
☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP
☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.03(4)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the president or treasurer empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if change of officers or directors is indicated with an addition.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/16/95 510-450-9450
Typed Name