## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 29 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## F93000004936 (1) DOCUMENT #

W.G. BEST WEINKELLERE!, INC.

Mailing Address Principal Place of Business 995 W KENNEDY BLVD 2665 ARIANE DR. STE. 201 SUITE 72A ORLANDO FL 32810 SAN DIEGO CA 92117 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 11/01/1993 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 33-0520458 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 28 Trust Fund Contribution 23 Zip Country Zip Country This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. ☐ Yes 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name PAASCH, MICHAEL 225 E. ROBINSON ST., STE. 600 Street Address (P.O. Box Number is Not Acceptable) MATEER & HARBERT P.A. ORLANDO FL 32802 Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 title if applicable (NOTE, Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition DELETE 1.1 TITLE Change TITLE LECKERT, HERBERT 1.2 NAME NAME 9 OBERNHAUSER WEG 1.3 STREET ADDRESS STREET ADDRESS NIEDERNHAUSEN GE 1.4 CITY - ST-7IP CITY - ST - ZIP \_\_ Change Addition DVST DETELE TITLE 2.1 TITLE HOPKINS, FONDA NAME 2.2 NAME 2628 GRANDVIEW ST 2 3 STREET ADDRESS STREET ADDRESS SAN DIEGO CA 92110 2. 4 CITY-ST-ZIP CITY - ST - ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST- ZIP CITY-ST-ZIP Addition DELETE Change 4.1 TITLE TITLE 4, 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP Change \_\_\_ Addition DELETE TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP ☐ Change Addition DELETE 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP

14. Hereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address. 619 627-1747

SIGNATURE: