## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED Jun 17, 2003 8:00 am Secretary of State

1. Entity Nan	MENT # F9500	Harris All Tolling Services	* - 3					
Principal Place of Business 205-B JIM OSWALO WAY AMERICAN CYN. CA 94503		Mailing Address PO BOX 452 ST. HELENA CA 94574				IN BANK BANK BANK BAN		
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.				100 MARIE BARRE BARRE 1		(III   III   I
					CHECK HERE IF MAKING CHANGES			
City & Stat	te	City & State			4. FEI Number 68-0224311 Applied For Not Applicable			
Zip	Country 🐇 😹	Zip	·Count	try	5. Certificate of Status Desire		3.75 Addi e Required	tional
	6. Name and Address of Current	Registered Agent			7. Name and Address of Na	w Registered Age	ent	<del></del>
			<del></del>	Name				
TROPICAL	L WINES, INC.			00-00-00-00-00-00-00-00-00-00-00-00-00-	(DO Gardin )		<u> </u>	
	W 25TH AVE O BCH FL 33069			. Street Addres	s (P.O. Box Number is Not Accept	able)		
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	in the second of the second			City		FL	Zip Code	
SIĞNATURE .	tions of registered agent.  Signature, typed or printed name of registered agent	· ·		·	stered agent, or both, in the State of	DATE	niliar with, a	nd accept
SIGNATURE . After	Signature, typed or printed name of registered again FILE NOW!!! FEE IS \$150.00 or May 172003 Fee will be \$550.00 k Payable to Florida Department of	and side if applicable	(NOTE: Registered	·	9. Election Campaign Trust Fund Contrib	n Financing oution.	\$5.00 Added t	May Be
SIGNATURE .  After Make Chack	Signature, typed or printed name of registered again FILE NOW!!! FRE IS \$150.00 or May 1; 2003 Fee will be \$550.00 the Payable to Florida Department of OFFICERS AND	of State  DIRECTORS	(NOTE: Registered	d Agent signature recu	aired when reinstating)  9. Election Campaigr	DATE  In Financing oution.   OFFICERS AND DI	\$5.00 Added I	May Be to Fees
SIGNATURE FARTON Make Chack  10. TITLE  NAME  STREET ADDRESS	Signature, typed or printed name of registered again FILE NOW!!! FRE IS \$150.00 or May 1; 2003 Fee will be \$550.00 or Payable to Florida Department of OFFICERS AND PC CARTLIDGE, TONY. 2790 SPRING ST.	and side if applicable	11. TITLE NAME STREE	d Agent signature requ	9. Election Campaign Trust Fund Contrib	DATE  In Financing oution.   OFFICERS AND DI	\$5.00 Added t	May Be to Fees
SIGNATURE SIGNATURE After Make Chack  10. TITLE NAME STREET ADDRESS CITY - ST-ZIP	Signature, typed or printed name of registered again FILE NOW!!! FEE IS \$150.00 or May 17:2003 Fee will be \$550.00 or Payable to Florida Department of OFFICERS AND PC CARTLIDGE, TONY 2790 SPRING ST. ST. HELENA CA 94574	of State  DIRECTORS  Delete	11. TITLE NAME STREE	S Agent signature requirements of the second	9. Election Campaign Trust Fund Contrib	DATE In Financing oution.	\$5.00 Added I	May Be to Fees
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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

SICULARE REGILIES PROPERTED NAME OF BIOMINIO OFFICER ON DIFFECTION

4/11 03 (707) SS Z-5199