

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2005 8:00 am
Secretary of State

02-07-2005 90062 003 ***150.00

DOCUMENT # J93468	
1. Entity Name CHARDONNAY INC.	

Principal Place of Business % THOMAS X. HIETPAS 207 BREVARD AVE. COCOA, FL 32922	Mailing Address % THOMAS X. HIETPAS 207 BREVARD AVE. COCOA, FL 32922
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2. Principal Place of Business %DANIEL COLZANI Suite, Apt. #, etc. 207 BREVARD AVENUE City & State COCOA, FLORIDA Zip 32922	Country	3. Mailing Address %DANIEL COLZANI Suite, Apt. #, etc. 207 BREVARD AVENUE City & State COCOA, FLORIDA Zip 32922	Country
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66003831



01252005 Chg-P CR2E034 (10/03)

4. FEI Number 59-2847953	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HIETPAS, THOMAS X. 207 BREVARD AVE. COCOA, FL 32922	
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7. Name and Address of New Registered Agent Name DANIEL COLZANI Street Address (P.O. Box Number is Not Acceptable) 207 BREVARD AVENUE City COCOA FL Zip Code 32922	
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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.

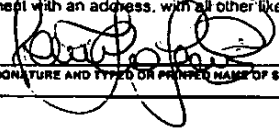
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HIETPAS, THOMAS X. 207 BREVARD AVE. COCOA, FL ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COLZANI, DANIEL 207 BREVARD AVE. COCOA, FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President ☒ Change ☐ Addition Daniel Colzani 207 Brevard Ave., Cocoa, FL 32922
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I 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 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:  **Daniel Colzani** **2-25-05** **(321) 631-1133**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #