

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M90637

FILED
Apr 02, 2004
Secretary of State

Entity Name: WINE AND FOOD SERVICES OF FLORIDA, INC.

Current Principal Place of Business:

27593 S. DIXIE HIGHWAY
NARANJA LAKES, FL 33032

New Principal Place of Business:

Current Mailing Address:

27593 S. DIXIE HIGHWAY
NARANJA LAKES, FL 33032

New Mailing Address:

FEI Number: 65-0088110

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALLETTE, WILLIAM
KEG SOUTH
27591 SOUTH DIXIE HWY
NARANJA LAKES, FL 33032 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPTS () Delete
Name: MALLETTE, WILLIAM H.,
Address: 27593 S. DIXIE HWY.
City-St-Zip: NARANJA LAKES, FL

Title: V () Delete
Name: SINCLAIR, SEAN
Address: 2665 SE 4TH PLACE
City-St-Zip: HOMESTEAD, FL 33033

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: CAVES, JASON
Address: 1411 NE 9 CT
City-St-Zip: HOMESTEAD, FL 33033

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM H MALLETTE

DPTS

04/02/2004

Electronic Signature of Signing Officer or Director

_____ Date