

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002908

FILED
Apr 26, 2006
Secretary of State

Entity Name: TAMPA BAY UNCORKED INC.

Current Principal Place of Business:

408 S. ARRAWANA AVENUE
UNIT C-3
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

408 S. ARRAWANA AVENUE
UNIT C-3
TAMPA, FL 33609

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EASON, TAYLOR
408 S. ARRAWANA AVENUE
UNIT C-3
TAMPA, FL 33609 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

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: EASON, TAYLOR
Address: 408 S. ARRAWANA AVENUE #C-3
City-St-Zip: TAMPA, FL 33609

Title: SEC () Delete
Name: PELLO, JON
Address: 408 S. ARRAWANA AVE. #C3
City-St-Zip: TAMPA, FL 33609

Title: TREA () Delete
Name: ZUKAS, NOELLE
Address: 2717 SEVILLE BLVD. #10303
City-St-Zip: TAMPA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TAYLOR E. EASON

PRES

04/26/2006

Electronic Signature of Signing Officer or Director

Date