2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

page lot

DOCUMENT # P00000015433 . 1. Entity Name BEST TIME WINES, INC. FILED 03 AUG -6 AM 10: 46 Principal Place of Business Malling Address SECRETARY OF STATE 4771 S.W. 8TH STREET 4771 S.W. 8TH STREET MIAMI, FL 33134-2546 NIAMI, FL 33134-2546 2. Principal Place of Business 3. Mailing Address Suite Apt. #. etc. Suite, Apt. #. etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 65-0981059 Not Applicable 7in Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent. DOURIEZ, PHILIPPE 4771 S.W. 8TH STREET Street Address (P.O. Box Number is Not Acceptable) MIAMI, FL 33134-2546 City Zip Code 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 Agents ignature required when reinstating) DATE TILE NOW!!! FEE IS \$150.00
After May 1: 2003 Fee will be \$850.00
Amended LIBR IS \$51.26
Make Check Payable to Florida Department of State 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. Dekete TITLE ☐ Change Addition DOURIEZ, PHILIPPE 400022292234 NAME NAME 4771 S.W. 8TH STREET ns/i3/03--01072--002 **450.00 STREET ADDRESS STREET ADDRESS CR2E034 CITY-ST-ZIP MIAMI, FL 331342546 CITY-ST-ZIP TITLE ☐ Delete TRIF Change Addition NAME HAME STREET ADDRESS STREET ADDRESS C11Y-51-2P CffY-Sf-7(P TITLE ☐ Defete TILE Change ☐ Admition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition HALLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-7IP TITLE Delete ☐ Change THIF ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-2IP TITLE Dekete Change ☐ Addition TITLE NAME HALLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3XI), 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 807, 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:

SIGNATURE AND TYPED OR PRINTED WARE OF SIGNING OFFICER OR DIRECTOR

Philippe Dowlog, Prg. 8/5/03

(786)303-5

Buytima Phone #

payeron

TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

AS PER YOUR INSTRUCTIONS, ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE FOR 2003 UNIFORM BUSINESS REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

CORDIALLY.

PHILIPPE DOT

PRESIDENT