2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P00000041873

DOCUMENT # F 1. Entity Name BURGOS MARKET & WINES	200000041873 s, INC.	
Principal Place of Business	Mailing Address	

Apr 17, 2003 8:00 am \$\frac{3}{2}\$
Secretary of State

04-17-2003 90620 012 ****

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DONGCO WALLET & WINEO, INC.			7			
Principal Place 10910 W. FLA MIAMI FL 331		Mailing Address 10910 W. FLAGLER STREET MIAMI FL 33174				
2. Principal f	Place of Business	3. Mailing Address			10) 11001 10111 10000 1111 1501	
Suite, Apt. #, etc. Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & Sta	te	City & State		4. FEI Number 65-1004324	Applied For Not Applicable	
Zip .	Country	Zip	Country		8.75 Additional	
	6. Name and Address of Cu	rrent Registered Agent		7. Name and Address of New Registered A	gent	
DULANTO	ANIA 84		Name	Name ,		
RIMONDI,			Street Address	Street Address (P.O. Box Number is Not Acceptable)		
#106	22ND AVENUE					
	33135		07		T= 0	
MIAMI FL 33135		City	FL	Zip Code		
	tions of registered agent. Signature, typed or printed name of registered		Registered Agent signature requi	tered agent, or both, in the State of Florida. I am fa		
Afte	FILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550 k Payable to Florida Departme	0.00	1 1	9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.		AND DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 11	
TITLE .	PD Burgos, Roberto J	☐ Delete	TITLE		☐ Change ☐ Addition	
NAME STREET ADDRESS	221 S.W. 22ND AVENUE		NAME STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33135	·	CITY-ST-ZIP			
TITLE	VD	☐ Delete	TITLE		☐ Change ☐ Addition	
NAME STREET ADDRESS	BURGOS, MONICA B 221 S.W. 22ND AVENUE		NAME STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33135		CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	
NAME]		NAME			
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP			
					☐ Change ☐ Addition	
TITLE NAME		☐ Delete	TITLE NAME		Change Addition	
STREET ADDRESS			STREET ADDRESS	,		
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	
NAME			NAME			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP		C Change C Addition	
TITLE NAME		☐ Delete	TITLE NAME		☐ Change ☐ Addition	
STREET ADDRESS		•	STREET ADDRESS		Í	

12. I hereby certify that the information supplied with this filling does not coallify 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 A Block 11 if changed, or on an attachment with an address, with all ther like provered. ther like

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNAT