

02-03

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000056617

1. Entity Name

A'APRIL WINE, INC.



FILED

03 JUN 18 AM 10:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

1490 W 49 PLACE

Suite, Apt. #, etc.

SUITE 335

City &amp; State

HIALEAH, FLORIDA

Zip

33012

Country

USA

3. Mailing Address

1490 W 49 PLACE

Suite, Apt. #, etc.

SUITE 335

City &amp; State

HIALEAH, FLORIDA

Zip

33012

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1118415

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

OSCAR E. COVAS

Street Address (P.O. Box Number is Not Acceptable)

1490 W 49 PLACE

SUITE 335

City

HIALEAH

FL

Zip Code

33012

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1, Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PD	OSCAR E. COVAS	1490 W 49 PL. SUITE 335	HIALEAH, FL 33012

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 on an attachment with an address with all other persons empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/10/03

Date

325 470 7504

Daytime Phone #

CR2E034B (12/02)

p 615

*Attachment*

*#P01000056617*

A'APRIL WINE, INC.  
2540 WEST 49 PLACE  
SUITE 335  
HIALEAH, FLORIDA 33012

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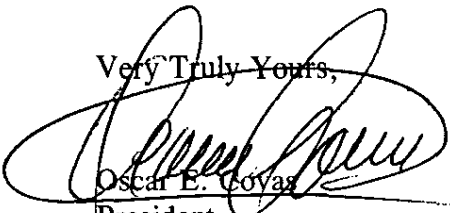
JUNE 10, 2003

Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

To Whom It May Concern:

The purpose of this letter is to let your office know that as of today I have not received the Annual Report form for my corporation for the year 2002 or 2003. I've called several times requesting it, and every time the response was, we will send you as soon as possible. Today when I called someone at your office finally told me that I could download this form from the internet. She also told me that I need it to write a letter explaining what had happen, so your office could review my case and attached a \$300.00 check with the annual report. I'm sending it to your office the way I was instructed by your office. If you need further information regarding this matter please, do not hesitate to contact me at your earliest convenience.

Very Truly Yours,

  
Oscar E. Goyas  
President