

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000071794

Entity Name: VINERY VENTURES, INC.

FILED
May 01, 2006
Secretary of State

Current Principal Place of Business:

1025 S. SEMORAN BOULEVARD,
1093
WINTER PARK, FL 32792

New Principal Place of Business:

4902 KIRKMAN ROAD
ORLANDO, FL 32811 US

Current Mailing Address:

1025 S. SEMORAN BOULEVARD,
1093
WINTER PARK, FL 32792

New Mailing Address:

4902 KIRKMAN ROAD
ORLANDO, FL 32811

FEI Number: 51-0415545

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATEL, SHILPEN N
1025 S. SEMORAN BOULEVARD
1093
WINTER PARK, FL 32792 US

Name and Address of New Registered Agent:

PATEL, SHILPEN N
4902 KIRKMAN ROAD
ORLANDO, FL 32811 US

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: SHILPEN PATEL

05/01/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTSD () Delete
Name: PATEL, SHILPEN N
Address: 1025 S. SEMORAN BOULEVARD, SUITE 1093
City-St-Zip: WINTER PARK, FL 32792

Title: V () Delete
Name: PATEL, HITESH N
Address: 1025 S. SEMORAN BOULEVARD, SUITE 1093
City-St-Zip: WINTER PARK, FL 32792

Title: V () Delete
Name: PATEL, SNEHLATA N
Address: 1025 S. SEMORAN BOULEVARD, SUITE 1093
City-St-Zip: WINTER PARK, FL 32792

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change () Addition
Name: PATEL, SHILPEN N
Address: 4902 KIRKMAN ROAD
City-St-Zip: ORLANDO, FL 32811

Title: V (X) Change () Addition
Name: PATEL, HITESH N
Address: 4902 KIRKMAN ROAD
City-St-Zip: ORLANDO, FL 32811

Title: V (X) Change () Addition
Name: PATEL, SNEHLATA N
Address: 4902 KIRKMAN ROAD
City-St-Zip: ORLANDO, FL 32811

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHILPEN PATEL

PSTD

05/01/2006

Electronic Signature of Signing Officer or Director

Date