

FILED
Sep 12, 2003 8:00 am
Secretary of State

09-12-2003 90090 046 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000126269			
1. Entity Name MANATEE WINE COUNTRY ADVENTURES, INC.			
Principal Place of Business 1995 EAST OAKLAND PARK BOULEVARD SUITE 100 OAKLAND PARK, FL 33306-1113		Mailing Address 1995 EAST OAKLAND PARK BOULEVARD SUITE 100 OAKLAND PARK, FL 33306-1113	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 90-0065107		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent COUPAL, JASON SCOTT 1995 EAST OAKLAND PARK BOULEVARD SUITE 100 OAKLAND PARK, FL 33306-1113		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (if not Registered Agent signature required when submitting)</small> DATE _____			
FILE NOW!!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD COUPAL, JASON SCOTT 1995 EAST OAKLAND PARK BOULEVARD OAKLAND PARK, FL 333061113 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 Block 11 if changed, or on an attachment with an address with all other like empowered.			
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		08-30-03 (9M) 567-3505 <small>Date Daytime Phone #</small>	

90156553

☐ CHECK HERE IF MAKING CHANGES

CREC034 (10/02)

attachment



JASON SCOTT COUPAL, P.A.

ATTORNEYS AT LAW

1995 EAST OAKLAND PARK BLVD. • SUITE 100 • OAKLAND PARK, FLORIDA 33306
954-567-3505 • FAX 954-567-3515

SEP 10 2003

September 10, 2003

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#P02000126269

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

RE: Manatee Wine Country Adventures, Inc.
Document No.: P02000126269

Dear Sir or Madam:

Enclosed please find the 2003 Uniform Business Report for the above-captioned corporation, as well as my check in the amount of \$150.00. We did not receive either the initial Uniform Business Report form or a late notice from the Department of State, and, pursuant to Florida law, we are thus requesting that the Department waive the \$400.00 late filing fee.

Very truly yours,

Jason Scott Coupal
President

JSC/mdg