2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000024744

Entity Name: JMP WINE IMPORTS, INC.

FILED Feb 25, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
3949 EVANS AVE STE 109A FT MYERS, FL 33901	3949 EVANS AVE STE STE. 109 A FT MYERS, FL 33901
Current Mailing Address:	New Mailing Address:
3949 EVANS AVE STE 109A FT MYERS, FL 33901	3949 EVANS AVE STE. 109 A FT MYERS, FL 33901
FEI Number: 42-1579641 FEI Number Applied For () FEI Number	nber Not Applicable () Certificate of Status Desired (X)
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
PAMPINELLA, PHILIP 3949 EVANS AVE STE 109A FT MYERS, FL 33901 US	PAMPINELLA, PHILIP 3949 EVANS AVE STE. 109 A FT MYERS, FL 33901 US
The above named entity submits this statement for the purpose on the State of Florida.	f changing its registered office or registered agent, or both,
SIGNATURE: PHILIP PAMPINELLA	02/25/2005
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: DP () Delete Name: MTCHEDLIDZE, MIKHEIL	Title: () Change () Addition Name:

4666 DELON STREET APT 289 Address: Address: City-St-Zip: FT MYERS, FL 33907 City-St-Zip: Title: DVS () Delete Title: () Change () Addition PAMPINELLA, JACQUELINE Name: Name: Address: 2517 E RETUNDA PKWY Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: Title: Title: () Delete () Change () Addition Name: PAMPINELLA, PHILIP Name: Address: 2517 E RETUNDA PKWY Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PHILIP PAMPINELLA T 02/25/2005