## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000024744

Entity Name: JMP WINE IMPORTS, INC.

FILED May 07, 2008 Secretary of State

| Littly Na  | IIIC. SIVIE VVII                                    | NE IIVIFORTS, INC.  |   |   |  |
|--|---|---|---|---|--|
| Current Principal Place of Business:               |   |   | New Principal Plac                          | New Principal Place of Business:                    |  |
| STE. 109 /   | NS AVE STE<br>A<br>S, FL 33901                      |   |   |   |  |
| Current Mailing Address:                           |   |   | New Mailing Addre                           | New Mailing Address:                                |  |
| 3949 EVANS AVE<br>STE. 109 A<br>FT MYERS, FL 33901 |   |   | STE. 112                                    | 10241 METRO PKWY.<br>STE. 112<br>FT MYERS, FL 33966 |  |
| FEI Number   | : 42-1579641  | FEI Number Applied For ( )  | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )                   |  |
| Name and Address of Current Registered Agent:      |   |   | Name and Address                            | Name and Address of New Registered Agent:           |  |
| 3949 EVAI<br>STE. 1097                             |   | JS  |   |   |  |
|  | e named entity<br>e of Florida.                     | submits this statement for the p  | purpose of changing its registe             | red office or registered agent, or both,            |  |
| SIGNATUI   |   |   |   |   |  |
|  | Electro   | nic Signature of Registered Ag  | ent   | Date  |  |
|  |   | 3(2)(b), F.S., the corporation did no<br>g Trust Fund Contribution ( ). | ot receive the prior notice.                |   |  |
| OFFICERS AND DIRECTORS:                            |   |   | ADDITIONS/CHAN                              | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:        |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:        | MTCHEDLIDZI   | STREET APT 289  | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                             |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:        | DVS (<br>PAMPINELLA,<br>2517 E RETUN<br>CAPE CORAL, | IDA PKWY  | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                             |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:        | DT (<br>PAMPINELLA,<br>2517 E RETUN<br>CAPE CORAL,  | IDA PKWY  | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                               |  |

I hereby certify that the information supplied with this filing does not qualify 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: MIKHEIL MTCHEDLIDZE DP 05/07/2008