

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 28, 2004 8:00 am
Secretary of State

06-28-2004 90009 014 ***150.00

DOCUMENT # P03000112410 1. Entity Name WINE CELLARS BY SHELLY, INC.					
Principal Place of Business 1200 S FEDERAL HWY #201 BOYNTON BEACH, FL 33435			Mailing Address 1200 S FEDERAL HWY #201 BOYNTON BEACH, FL 33435		
2. Principal Place of Business 9296 TALWAY CIRCLE Suite, Apt. #, etc.			3. Mailing Address 9296 TALWAY CIRCLE Suite, Apt. #, etc.		
City & State BOYNTON BEACH FL.		City & State BOYNTON BEACH FL.		4. FEI Number 04-3777234	
Zip 33437		Country U.S.A.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MARINCAVAGE, ALLEN W SR 1200 S FEDERAL HWY STE 1-201 BOYNTON BEACH, FL 33435				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: <u>Shelly Weiss</u> DATE: <u>6-23-04</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE: D <input type="checkbox"/> Delete NAME: WEISS, SHELLY STREET ADDRESS: 1200 S FEDERAL HWY #201 CITY-ST-ZIP: BOYNTON BEACH, FL 33435			TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME: STREET ADDRESS: CITY-ST-ZIP:		
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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: <u>Shelly Weiss</u> DATE: <u>6-23-04</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					