

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000068397

Entity Name: TRUE VINE LIMITED CORP.

FILED  
May 02, 2005  
Secretary of State

## Current Principal Place of Business:

6278 N. FEDERAL HWY  
#319  
OAKLAND PARK, FL 33308

## Current Mailing Address:

6278 N. FEDERAL HWY  
#319  
OAKLAND PARK, FL 33308

## New Principal Place of Business:

6278 N. FEDERAL HWY  
#319  
FORT LAUDERDALE, FL 33308

## New Mailing Address:

6278 N. FEDERAL HWY  
#319  
FORT LAUDERDALE, FL 33308

FEI Number: 33-1099095

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FONTOURA, TONY  
669 W OAKLAND PARK BLVD.  
#B214  
OAKLAND PARK, FL 33311 US

## Name and Address of New Registered Agent:

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:

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: D ( ) Delete  
Name: GLAUBER, LARRY  
Address: 445 S. YONGE ST.  
City-St-Zip: ORMOND BEACH, FL 32174

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: TONY, FONTOURA  
Address: 6278 N. FEDERAL HWY. #355  
City-St-Zip: FORT LAUDERDALE, FL 32174

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: TONY FONTOURA

D

05/02/2005

Electronic Signature of Signing Officer or Director

Date