
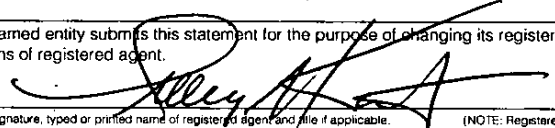
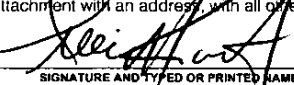


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 25, 2006 8:00 am**  
**Secretary of State**

07-25-2006 90021 022 \*\*\*150.00

<b>DOCUMENT # P05000012359</b> 1. Entity Name <b>WINTER PARK WINE ENTERPRISES, INC.</b>					
Principal Place of Business <b>8550 OLD WINTER GARDEN ROAD ORLANDO, FL 32835</b>			Mailing Address <b>8550 OLD WINTER GARDEN ROAD ORLANDO, FL 32835</b>		
2. Principal Place of Business <b>501 N ORLANDO AVE</b>		3. Mailing Address <b>501 N. ORLANDO AVE.</b>			
Suite, Apt. #, etc. <b># 325</b>		Suite, Apt. #, etc. <b># 325</b>			
City & State <b>WINTER PARK FL.</b>		City & State <b>WINTER PARK FL.</b>		4. FEI Number <b>14-1921136</b>	
Zip <b>32789</b>		Country <b>ORANGE</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>KARST, CRAIG 8550 OLD WINTER GARDEN ROAD ORLANDO, FL 32835</b>		7. Name and Address of New Registered Agent Name <b>CRAIG KARST</b> Street Address (P.O. Box Number is Not Acceptable) <b>501 N. ORLANDO AVE. # 325</b> <b>WINTER PARK</b> City <b>FL</b> Zip Code <b>32789</b>			
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  <b>7/17/06</b> <small>Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KARST, DENISE M 8550 OLD WINTER GARDEN ROAD ORLANDO, FL 32835	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS KARST, CRAIG J 8550 OLD WINTER GARDEN ROAD ORLANDO, FL 32835	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KARST, DENISE M 3304 BEAZER DR. OCFEE, FL 34761	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS KARST, CRAIG J. 3304 BEAZER DR. OCFEE, FL 34761	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	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 exemptions contained 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 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:  <b>CRAIG J. KARST</b>		<b>7/17/06 407-4661024</b> <small>DATE Daytime Phone #</small>			

ATTACHMENT  
401 00579

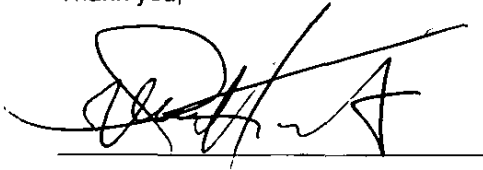
Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Winter Park Wine Enterprises, Inc.

Dear Sirs,

As a new S-Corp. we never received a notice until the reminder notice came in mid. to late June.  
Please waive the late payment and note the change of address for mailing.

Thank you,

A handwritten signature in black ink, appearing to read 'Craig J. Karst', is written over a horizontal line.

Craig J. Karst

Secretary