

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000010712

**FILED**  
**Feb 02, 2012**  
**Secretary of State**

**Entity Name:** TERRAVINE WINERY CORP.

**Current Principal Place of Business:**

8680 CEDAR HAMMOCK CIRCLE STE 118  
NAPLES, FL 34112

**New Principal Place of Business:**

8274 TWELVE OAKS CIRCLE  
114  
NAPLES, FL 34113

**Current Mailing Address:**

8680 CEDAR HAMMOCK CIRCLE STE 118  
NAPLES, FL 34112

**New Mailing Address:**

8274 TWELVE OAKS CIRCLE  
114  
NAPLES, FL 34113

**FEI Number:** 35-2296137

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHAU, MARIO R  
8274 TWELVE OAKS CIRCLE APT 114  
NAPLES, FL 34113 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

**OFFICERS AND DIRECTORS:**

**Title:** DPS  
**Name:** CHAU, MARIO R  
**Address:** 8274 TWELVE OAKS CIR #114  
**City-St-Zip:** NAPLES, FL 34113

**Title:** DT  
**Name:** SCHONFELD, MARTINA E  
**Address:** 8274 TWELVE OAKS CIR #114  
**City-St-Zip:** NAPLES, FL 34113

I hereby 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 all other like empowered.

**SIGNATURE:** MARTINA SCHONFELD

MS

02/02/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date