2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2008 08:00 AN Secretary of State

ANNUAL REPORT					Apr 30, 2008 08:00				
DOCUMENT # P06000099808 1. Entity Name ZODIAC FINE WINE & SPIRITS INC.						2	Secre	etary of Sta	
5522 CORTI	ce of Business EZ RD W N, FL 34210	Mailing Address 5522 CORTEZ RD W BRADENTON, FL 34210				# 18#1 8 # 18# 88 11		4111 JUN 1811 INVITA (181	
DO NOT WRITE IN THIS SPA				03072008 No Chg-P CR2E034 (11/05) 4. FEI Number					
6. Name and Address of Current Registered Agent SCOTT, MARILYN E 4551 HIDDEN VIEW PLACE SARASOTA, FL 34235				- 	=	NOT W			
8. The above the obligat	e named entity submits this statement for the tions of registered agent. Signature, typed or printed name of registered agent and in		ed office or re	· · · · · ·		th, in the State of Flo	orida. I am	familiar with, and accept	
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Finar Trust Fund Contribution.		\$5.0 Added	May Be I to Fees	<u>10000</u> 0	093410]2	
10. ITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIR V SCOTT, RONALD M 4551 HIDDEN VIEW PLACE SARASOTA, FL 34235 PTS SCOTT, MARILYN E 4551 HIDDEN VIEW PLACE SARASOTA, FL 34235	ECIORS				NOT W			
TITLE NAME STREET ADDRESS									

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:

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS
CITY-ST-ZIP

Marchy & Scott MARIL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARILYN E SCOTT

5/08 941-792

Daytime Phone #