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Apr 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P27082 (7)
1. Corporation Name
WINE MARKETS INTERNATIONAL INC.



Principal Place of Business
100 CROSSWAYS PARK WEST
WOODBURY NY 11797

Mailing Address
100 CROSSWAYS PARK WEST
WOODBURY NY 11797-2012

3. Date Incorporated or Qualified 11/29/1989
3a. Date of Last Report 04/26/1996

2. Principal Place of Business 21 Suite, Apt. #, etc.
2a. Mailing Address 26 Suite, Apt. #, etc.
4. FEI Number 11-2543243
Applied For Not Applicable

22 City & State 27 City & State
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

23 Zip 25 Country 28 Zip 30 Country
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 29 30
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GRANTHAM DISTRIBUTING CO., INC.
2885 HANSROB ROAD
ORLANDO FL 32804

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PVS	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NATHANSON, MITCHELL S.	1.2 NAME	
STREET ADDRESS	100 CROSSWAYS PARK WEST	1.3 STREET ADDRESS	
CITY-ST-ZIP	WOODBURY NY	1.4 CITY-ST-ZIP	
TITLE	TD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NATHANSON, MITCHELL S.	2.2 NAME	
STREET ADDRESS	100 CROSSWAYS PARK WEST	2.3 STREET ADDRESS	
CITY-ST-ZIP	WOODBURY NY	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE: [Signature] 04/22/97 (516) 364-1850

CR2E034 (9/96)