

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 07, 1999 8:00 am
Secretary of State

04-07-1999 90034 013 ***150.00

DOCUMENT # P37213

1. Corporation Name

AMERICAN WINE TRADE, INC.

Principal Place of Business

195 NE GILMAN BLVD
ISSAQUAH WA 98027
US

Mailing Address

195 NE GILMAN BLVD
ISSAQUAH WA 98027
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/24/1992

4. FEI Number

91-1433596

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes ☐ No

9. Name and Address of Current Registered Agent

LEVINE, DAVID P
LIQUID ASSETS OF FT UNLIMITED
8563 NW 52ND PLACE
CORAL SPRINGS FL 33067

10. Name and Address of New Registered Agent

81 Name

Stan Starzyk / Solar Selections, Inc.

82 Street Address (P.O. Box Number is Not Acceptable)

13230 SW 32nd Court

83

84 City

Davie

FL

85 Zip Code

33330

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)

3/10/99

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME HANZON, MATS
STREET ADDRESS BIBLIOTEKSGATAN 12 103 86
CITY-ST-ZIP STOCKHOLM, SWEDEN

TITLE ☐ DELETE
NAME PDV
STREET ADDRESS HEDGES, TOM
CITY-ST-ZIP 4253 249TH CRT SE
ISSAQUAH WA 98029

TITLE ☐ DELETE
NAME SDT
STREET ADDRESS HEDGES, ANNE-MARIE
CITY-ST-ZIP 4253 249TH CRT SE
ISSAQUAH WA 98029

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 4145 Peregrine Pt. Way SE
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 4145 Peregrine Pt. Way SE
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

3/29/99 (425) 391-6056

Date

Daytime Phone #

CR2E034 (4/1/98)