2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P38597

City-St-Zip: GROTON, CT 06340 CT

FILED Mar 23, 2006 Secretary of State

Entity Name: ANGELINI WINE, LTD. INC.						
Current Principal Place of Business:			New Principal Place of Business:			
	RIAL PARK DRIVE ROOK, CT 06409 US	3				
Current Mailing Address:			New Mailing Address:			
	RIAL PARK DRIVE ROOK, CT 06409 US	3				
FEI Number:	06-1177773 FEI Numb	per Applied For () F	El Number Not Appli	cable ()	Certificate of S	Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
	PAUL V 1 FOREST DR S EACH, FL 33445 US					
The above in the State	named entity submits this of Florida.	s statement for the purp	ose of changing it	s registered o	ffice or registe	ered agent, or both,
SIGNATUR	RE:					
	Electronic Signatur	re of Registered Agent			Date	
Election Can	npaign Financing Trust Fund	Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DCP () Delete ANGELINI, JULIUS A 1477 ESSEX ROAD NEW LONDON, CT 06498 C	тст	Title: Name: Address: City-St-Zip:	()	Change () Add	lition
Title: Name: Address: City-St-Zip:	DVC () Delete ANGELINI, PAUL V 7 WYNN CIRCLE EAST LYME, CT 06333 CT		Title: Name: Address: City-St-Zip:	DVC (X) ANGELINI, PAU 15 CLARK LN ESSEX, CT 06		lition
Title: Name: Address: City-St-Zip:	DSC () Delete PLEBISCITO, RONALD E 173 HAZELNUT HILL RD GROTON, CT 06340 CT		Title: Name: Address: City-St-Zip:	()	Change () Add	ition
Title: Name: Address: City-St-Zip:	VPT () Delete ANGELINI, PAUL V 7 WYNN CIRCLE EAST LYME, CT 06333 CT		Title: Name: Address: City-St-Zip:	VPT (X) ANGELINI, PAU 15 CLARK LN ESSEX, CT 06		lition
Title: Name: Address:	S () Delete PLEBISCITO, RONALD E 173 HAZEI NUT RD		Title: Name: Address:	()	Change () Add	ition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

City-St-Zip:

SIGNATURE: PAUL V. ANGELINI VΡ 03/23/2006