

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 17 AM 11:50

DOCUMENT # P94000083989 (1)

1. Corporation Name

JACARANDA WINES & SPIRITS ENTERPRISES, INC.

Principal Place of Business

1655 S.W. 157 AVE.
PEMBROKE PINES FL 33027

Mailing Address

1655 S.W. 157 AVE.
PEMBROKE PINES FL 33027

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/17/1994

3a. Date of Last Report
N/A

4. FEI Number

65-0533261

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 has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☒ No

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

24. Zip

Country

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

29. Zip

Country

9. Name and Address of Current Registered Agent

TOSCANO, MARION
1655 S.W. 157 AVE.
PEMBROKE PINES FL 33027

10. Name and Address of New Registered Agent

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 the 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 of Registered Agent or Registered Agent in Charge)

(Signature of Registered Agent or Registered Agent in Charge)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

D

TOSCANO, MARION
1655 S.W. 157 AVE
PEMBROKE PINES FL 33027

1. TITLE

1. NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

D

TOSCANO, STEVEN
1655 S.W. 157 AVE
PEMBROKE PINES FL 33027

2. TITLE

2. NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

3. TITLE

3. NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

4. TITLE

4. NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

5. TITLE

5. NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

6. TITLE

6. NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

7. TITLE

7. NAME

7.3 STREET ADDRESS

7.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

8. TITLE

8. NAME

8.3 STREET ADDRESS

8.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

9. TITLE

9. NAME

9.3 STREET ADDRESS

9.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

10. TITLE

10. NAME

10.3 STREET ADDRESS

10.4 CITY, ST, ZIP

☐ Change ☐ Addition

SIGNATURE:

S.A. Toscano

S.A. Toscano, Pres. 1/9/1995

(305) 370-3170

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

TELEPHONE