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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 09 1997 8:00am Secretary of State

DOCUMENT # P94000093430 (4) WINEMAKER'S PANTRY, INC. Principal Place of Business Mailing Address 4599 PARK BLVD. 4599 PARK BLVD PINELLAS PARK FL 24885-PINELLAS PARK FL 33781-3527 33781 3a. Date of Last Report 3. Date Incorporated or Qualified 01/01/1995 03/06/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3288212 Not Applicable 21 26 Suite, Apt #, etc. Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5,00 May Be Trust Fund Contribution 23 28 Added to Fees Country Zip 8. This corporation has liability for intangible tax under s. 199.032, 181 🗶 Yes 🔲 No 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MYERS, BRUCE/17 81 Name 4599 PARK BLVD Street Address (P.O. Box Number is Not Acceptable) PINELLAS PARK FL-34865 83 33761 84 City 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 objection 607,0505, Florida Statutes. SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AN 13. Till nps DELETE 1.1 TITLE - Change | Addition MYERS, J. BRUCE 1.2 NAME 4599 PARK BLVD. STREET ADDRESS 1.3 STREET ADDRESS 3378 PINELLAS PARK FL 84665 011Y-81-20 1.4 City-St-ZiP DELETE 2.1 TITLE TilluF MYERS, DARLENE F 22 NAME 33781 4599 PARK BLVD. STEELT ADDRESS 2.3 STREET ADDRESS 33781 PINELLAS PARK FL 34005 2. 4 CITY - ST - ZIP DELETE 31 TITLE Change Addition URE NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS CITY - S1 - 749 3.4. CITY - ST - ZIP DELETE Change Addition THE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADORESS 4.4 CITY - ST - ZIP CHY-\$1-709 DELETE 5.1 TITLE Change Addition 11014 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 54 CITY-ST-ZIP CHY - \$1 - 20 DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME **6 3 STREET ADDRESS** STREET ADDRESS

14. I do hereby certify that the information supplied with this filling 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 charged, or on an appearon; with an address.

6.4 CITY-ST-ZIP

SIGNATURE:

CHTY-ST-ZIP

Dayling Phone