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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DE PARTMENT OF STATE Sandra B. Mortham

Secretary of State

1996

TITLE NAME

TITLE

NAM:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

DIVISION OF CORPORATIONS

P95000070891 (3) **DOCUMENT #**

G.G. V	VINTERS DISTRIBUTING	i, INC.								
Principal Place of Business Mailing Address							***	IA MUHAL MUHAL IND		1417 6 1819 1187 1881
6800 S.E. 119TH STREET Belleview fl. 34420			6900 S.E. 119TH STREET BELLEVIEW FL 34420							
							3. Date Incorporated or Qualified 09/14/1995	3a. Date	of La:	st Report
2. Principal Pla	ace of Business	2a. Mailing Add	2a. Mailing Address			4. FEI Number			Applied For	
21			26			.			Not Applicable	
Suite, Apt. #	#, etc.	Suite, Apt. :				5. Certificate of Status Desired			.75 Additional ee Required	
City & State			City & State				6. Election Campaign Financing	П		.00 May Be
23		28					Trust Fund Contribution			dded to Fees
Zip	Country Zip			Country			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes XNo			
24	25 9. Name and Address of Cu	29 29	30	l,			10. Name and Address of New I		aent	
	9, Name Bild Address of Ct	irrent negistered Agent		81	il N	Vame	10. Name and Address of New I	negistered A	yem	
WINTERS, GEORGE G				82			Iress (P.O. Box Number is Not Accepta	ble)		
6800 S.E. 119TH STREET				02	62 Street Address (F.O. Box Northberts Not A			iole)		
BELLEVIEW FL 34420				83						
				84	미	City		FL	85	Zip Code
SIGNATURE							oration submits this statement for the pu ard of directors. Thereby accept the app		nging	its registered office cred agent. I am
	Signature, typied or printed name of registered		(NOTE: Ros		ા કહ	prature respoir	ADDITIONS CHANGES TO OF	DATE		OTODO IN 10
12.	D	S AND DIRECTORS	LETE	13.			ADDITIONS/CHANGES TO OF		Chai	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
NAME	WINTERS, GEORGE G		CLIL	1.2 NAME				L	, 0	igo 🗀 radanon
STREET ADDRESS	6800 S.E. 119TH STREE	т		1.3 \$TREE		notée				
CITY-ST-ZIP	BELLEVIEW FL 34420	1								
TITLE	DECEEVIEW 1 E 04420	[] DE	LETE	14 CITY -: 2 1 TITLE) Chai	nge 🔲 Addition
NAME		—		2.2 NAME				<u> </u>	•	• 5
STREET ADDRESS				2 3 S1REL		DRESS				
CiTY+S1-ZiP				24 CITY-1		1				
TITLE		DE	l E I E	3 1 111LE		· †	· · · · · · · · · · · · · · · · · · ·) Chai	nge 🔲 Addition
NAME				3.2 NAME						
STREET ADDRESS				33 STREE	et a c	DRESS				
CITY - ST - ZIP				3.4 CHY-	S1-7	ղթ				
TITLE		[] DE	LETE	4 1 TITLE		1] Cha	nge 🔲 Addition
NAME				4.2 NAME						
STREET ADDRESS				4 3 STREE	I AD	DRESS				
CITY - S1 - ZIP				4.4 CITY -	ST- Z	5P				

6 4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 13 if changed, or on an attachment with an address.

5 1 THEF

5.2 NAME 5.3 STREET ADDRESS

6 1 TITLE

6.2 NAME

5 4 CITY - ST-ZIP

6.3 STREET ADDRESS

DELETE.

DELETE

HOTHE HUINTED SE GEORGE G. WINTERS, PRES. 3 12 96 357-245-8183 SIGNATURE:

☐ Change

Addition

Change Addition