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FILED
Mar 20 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000003092 (9)

1. Corporation Name
FOUNTAINHEAD WINE, INC.

Principal Place of Business
3360 DOCKSIDE DR.
COOPER CITY FL 33026

Mailing Address
3360 DOCKSIDE DR.
COOPER CITY FL 33026-3780



2. Principal Place of Business

21 6702 MAIN ST
State Apt. #, etc.

22 City & State

23 MIAMI LAKES, FL
Zip Country

24 33014 25 USA

2a. Mailing Address

26 6702 MAIN ST
State Apt. #, etc.

27 City & State

28 MIAMI LAKES, FL
Zip Country

29 33014 30 USA

3. Date Incorporated or Qualified
01/08/1996

3a. Date of Last Report

4. FEI Number

65-0631911

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

9. Name and Address of Current Registered Agent

JONES, RICHARD A
3360 DOCKSIDE DR.
COOPER CITY FL 33026

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 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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

12.1 TITLE
PSD
NAME
JONES, RICHARD A
STREET ADDRESS
3360 DOCKSIDE DR.
CITY, ST, ZIP
COOPER CITY FL 33026

DELETE

12.2 TITLE
VSD
NAME
JONES, SONIA M
STREET ADDRESS
3360 DOCKSIDE DR.
CITY, ST, ZIP
COOPER CITY FL 33026

DELETE

12.3 TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

DELETE

12.4 TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

DELETE

12.5 TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

DELETE

12.6 TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

DELETE

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

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 and data 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.

SIGNATURE:

RICHARD A. JONES

3/17/97

(305) 819-7454

CR2E034 (9/96)