FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000056824 (1)

PRESTIGE WINE IMPORTERS AND DISTRIBUTOR INC.

FILED Apr 29 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 4435 OLD WINTER GARDEN ROAD 4435 OLD WINTER GARDEN ROAD ORLANDO FL 32802 ORLANDO FL 32811-4240								
					3. Date incorporated or Qualified 07/03/1996	1	te of Last R	·
2. Principal Pla		2a. Mailing Address	· / ·	1. C. co. 10	4. FEI Number 59-3401112		}	oplied For
21 6437 Central Avenue 26 /3220 Suite Apt #, etc Suite, Apt #.			lican Creek Crossing		59-3901112		\$8.75	ot Applicable
22 27					5. Certificate of Status Desired	e of Status Desired Fee Required		
3 St. Petersburg, FL.		City & State	28 St. Petersburb, FL.		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip つうプラノイ	Country SA	Zip 22707	Count		8. This corporation has liability for			. 199.032,
24 33 // 0	9. Name and Address of Curre		30) VS	14	Florida Statutes 10. Name and Address of New Re		No Agent	
RUIM	BERGEXCELSIOR CORPORAT		B	1 Name	[O, Italia atla Adalasa of Italia	Biotoco	190.11	
	OLD WINTER GARDEN ROAD	E OMITIOES, MIO	ā	2 Cucot Addres	on (D.O. Day Number in Not Accorded	202		·
ORLANDO FL 32802				Z Stieet Addie	ess (P.O. Box Number is Not Acceptable)			
			8	3				
			8	4 City	·		85 Zip i	Code
				<u> </u>	ration submits this statement for the p	FL		
SIGNATURE S	ignature, typed or penied name of registered as OFFICERS AI	yent and title if applicable INOTE	Registered A	gent signature required	d when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND	DIRECTOR	3S IN 12
THE	D	DELETE	1.1 TITLE				Change	Addition
NAME	ROPPEL, HUGO	200410	1.2 NAM	1				
STREET ADDRESS	1322 D PELICAN CREEK COI ST. PETERSBURG FL 33707	TOSINU	•	ET ADDRESS				
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NAM ²		C State	2.2 NAM	ı				
STREET ADDRESS				ET ADDRESS				
CITY ST-7FF			2 4 CiTY					
Total		☐ DELETE	3.1 TITLE				☐ Change	Addition
NAME			3.2 NAM	Ē		-		•
STREET ADDRESS				ET ADDRESS				
CITY - S1 - ZIP		DELETE	3.4. CITY 4.1 TITLE				Change	Addition
NAME	4	_ DECEME	4. 2 NAN				- Committee	
STREET ADDRESS				ET ADDRESS				
C-TY - S1 - ZIP			4.4 CITY	-ST-ZIP				
FILLE		DELETE	5.1 TITLE				Change	Addition
NAME			52 NAM	E				
STREET ADDRESS				ET ADDRESS				
CITY-ST-7IP		☐ DELETE		-ST-ZIP		·	Channe	Addition
TILLE		☐ Dereie	6.1 TITLE	1			L Change	Manifoli
NAME CONCLADORILE			6.2 NAM	ET ADDRESS				
STREET ADDRESS CITY+ST-ZIP			6.4 CITY					
14 Ldc herch	y certify that the information supuli	ed with this filing does not qualify	for the e	remotion stated	in Section 119.07(3)(i), Florida Statute	s. I further	certify that	the
information Lam an off	undicated on this #must report or	supplymental annual report is true or the receiver or trustee empowe	red to ex	curate and that r	my signature shall have the same leg as required by Chapter 607, Florida	al effect as	t if made un	ider oath: tha