2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000073294 1. Entity Name				Jan 31, 2000 8:00 am Secretary of State	
VINOS A	NDES IMPORT COMPANY	•		01-31-2000 90105 030 ***150.00	
Principal Place	e of Business	Mailing Address			
3000 HIGH RIDG BOYNTON BEAC		3000 HIGH RIDGE RD #15 BOYNTON BEACH FL 33426-8	7772	9 1 1 4 7 1	
2. Principal Pla	ace of Business HIGH RIDGC Rd. #15 F, etc.	3. Mailing Address 3. DANBY #PLAC	ECK :	DO NOT WRITE IN THIS SPACE	
City & State	· 	BOYNTON BCH		4. FEI Number 65-0861421 Applied For Not Applied For	
Zip 334	26 Country SA	^{zip} 33426	Country	5. Certificate of Status Desired	
	6. Name and Address of Current		Name	7. Name and Address of New Registered Agent	
ALDEI O MONICA				Idress (P.O. Box Number is Not Acceptable) FL Zip Code	
9. This corpo Tax filing re (See criteri	Signature, typed or printed name of registered agent a ration is eligible to satisfy its Intangible aquirement and elects to do so. a on back)	FILE NOW!!! After MAY 1, 2000 Make Check Payable	FEE IS \$150.00 Fee will be \$550 to Department of	50.00 Trust Fund Contribution. Added to Fees	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND CEO DIMARIA, SHADRACH 3 DANBRY PL BOYNTON BEACH FL	DIRECTORS Delete	NAME 1 STREET ADDRESS	CEO XI Change Addition DI MARIA; SHADYACH 3 DANBY PLACE BOYNTON BCH FL 33426	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ALBELLO, MONICA 3 DANBY PL BOYNTON BEACH FL	☐ Delete	TITLE	PALBELO, MONICA 3 DANSY PL BOYNTON BCH FL 334Zb	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME * STREET ADDRESS* C	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
				ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information ave the same legal effect as if made under oath; that I am an officer or director pter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if	

TO THE COPIL STREET TO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

1-12-00

Daytime Phone #

FILED