FILED

## 2002 UNIFORM RUSINESS DEDORT (URD)

City & State  City & State  Country  Zip  Country  Zip  Country  Zip  Country  5. Certificate of Status Desired   S8.7   Fee Re  RATHJE, MERRITT  57 SE 7 AVE  DEERFIELD BEACH FL 33441  City  Street Address (P.O. Box Number is Not Acceptable)  FL Zip  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE  Signature, hyperd or printed sures of registery places in the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE  Signature, hyperd or printed sures of registery places in the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE  Signature, hyperd or printed sures of registery places in the purpose of changing its registered office or registered agent, or both, in the State of Florida.  FILE NOW!!! FEE IS \$150.00  After May 1, 2002 Fee will be \$550.00  Make Check Payable to Department of State  11. OFFICERS AND DIRECTORS  TITLE  Delete  TITLE  Delete  MAME  SIREET ADDRESS  CITY-SI-ZIP  TITLE  MAME  SIREET ADDRESS  CITY-SI-ZIP  Delete  SIREET ADDRESS  CITY-SI	DOCUMENT # P98000091167  1. Entity Name WINES OF MERRITT INC					Apr 29, 2002 8:00 am Secretary of State 04-29-2002 90127 038 ***150.00		
Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  DO NOT WRITE IN THIS SPACE  City & State  City & State  City & State  City & State  Country  Zip  Country  S. Certificate of Status Desired   \$8.7'   Fee Re  8. Name and Address of New Registered Agent  Name  RATHJE, MERRITT  57 SE 7 AVE  DEERFIELD BEACH FL 33441  City  FL  Zir  City  FL  Zir  City  FL  Zir  City  FL  Zir  Street Address (P.O. 9ox Number is Not Acceptable)  FILE NOW!! FEE IS \$150.00  ARK Check Payable to Department of State  11.  OFFICERS AND DIRECTORS  PATHLE, MERRITT  TO SET AVE  Delete  NAME  SIREET ADDRESS  CITY ST- Zip  City	57 SE 7 AVE DEERFIELD BEACH FL 33441		57 SE 7 AVE DEERFIELD BEACH FL 33441			: 1001/1001 (1/0 10/07 10/1/ 00/1/ 00/1/ 00/1/ 00/1/ 00/1/ 00/1/	10 1010 1100 1100	1 (1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
City & State  Country  Country  Country  S. Certificate of Status Desired  S. R.7. Name and Address of New Registered Agent  Name  RATHJE, MERRITT  57 SE 7 AVE  DEERFIELD BEACH FL 33441  City  FL Zit  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florida.  SIGNATURE  Signature, spend or prince name of registery purpose of changing its registered diffice or registered agent, or both in the State of Florida.  SIGNATURE  Signature, spend or prince name of registery purpose of changing its registered diffice or registered agent, or both in the State of Florida.  High Country  Determine on book of the Country  After May 1, 2002 Fee will be \$550.00  After May 1, 2002 Fee will be \$550.00  Make Check Payable to Department of State  10. Election Campaign Financing Trust Fund Contribution.  Trust Fund Contribution.  Trust Fund Contribution.  City St. 2P  TILE  NAME  SIREET ADDRESS  CITY-ST-2P  City ST-2P  City	. Principal P	Place of Business	3. Mailing Address					
Zip Country Zip Country 5. Certificate of Status Desired Service 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address 7. Name Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  FL Zip	Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
S. Certificate of Status Desired   See R   S. Name and Address of Current Régistered Agent   Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Numb	City & State		City & State		4.	4. FEI Number 65-0873013 Applied For Not Applicable		
RATHJE, MERRITT 57 SE 7 AVE DEERFIELD BEACH FL 33441  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  SIGNATURE  9. This corporation is eligible to satisfy its Intangible Tax Riling requirement and elects to do so. (See criteria on back)  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11. OFFICERS AND DIRECTORS  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. MAME STREET ADDRESS  CITY-ST-2P  15. DEIGN  16. Election Campaign Financing Trust Fund Contribution.  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  10. Election Campaign Financing Trust Fund Contribution.  11. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  17. STREET ADDRESS  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  10. Electron Campaign Financing To OFFICERS AND DIRECTORS  10. Electron Campaign Financing To OFFICERS	Zip	Country	Zip	Country	5.	Certificate of Status Desired	\$8.75 Add	ditional
Street Address (P.O. Box Number is Not Acceptable)    City   FL   Zir		6. Name and Address of Current Re	gistered Agent	Name	~~~7.	Name and Address of New Registered		
### DEERFIELD BEACH FL 33441    City   FL   Zife	•			Street Addr	Street Address (P.O. Box Number is Not Acceptable)			
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE  Signature, typed of printed name of registere/plagent and title. Poblicable. (NOTE: Registered Agent signature required when reinstating)  9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  15. STREET ADDRESS  16. CITY-ST-ZIP  17. ST-ZIP  17. ST-ZIP  17. ST-ZIP  17. ST-ZIP  17. Delete  17. ST-ZIP  17. ST-Z		· · · ·			**	•		
SIGNATURE    Signature, typed or printed nume of registerin/pagent and title // pipicable. (NOTE: Registered Agent signature required when reinstating)   Part   Pa				City		F	Zip Cod	e
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SIGNATURE: \_

SIGNATURE AND A PER OF PRINTE NAME OF SIGNING OFFICER OR DIRECTOR REQUIRED

954.698.0176 Daytime Phone #