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Mar 25 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 # F94000001808 (4)

1. Corporation Name

BACARDI-MARTINI NORTH AMERICA, INC.

Principal Place of Business

886 PONCE DE LEON BLVD. 2ND FLOOR
CORAL GABLES FL 33134
US

Mailing Address

% BACARDI IMPORTS, INC.
2100 BISCAYNE BLVD.
MIAMI FL 33137-5014

3. Date Incorporated or Qualified
04/08/1994

3a. Date of Last Report
04/16/1996

2. Principal Place of Business

21 2100 Biscayne Blvd.

Suite, Apt. #, etc.

22 Miami, FL

City & State

23 33137

Zip

U.S.A.

Country

24

25

Country

2a. Mailing Address

26 2100 Biscayne Blvd.

Suite, Apt. #, etc.

27 Miami, FL

City & State

28 33137

Zip

Country

29

30

4. FEI Number

65-0483246

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

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

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

Signature type and print name of registered agent and fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

PD
NACLERIO, STEVEN
2100 BISCAYNE BLVD.
MIAMI FL 33137

☒ DELETE

SD
MESSIRY, JAMES
2100 BISCAYNE BLVD.
MIAMI FL 33137

☒ DELETE

TD
MAGUIRE, MICHAEL
2100 BISCAYNE BLVD.
MIAMI FL 33137

☒ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

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TITLE NAME STREET ADDRESS CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-STATE-ZIP

PD
Eduardo M. Sardina
2100 Biscayne Blvd.
Miami, FL 33137

☒ Change ☐ Addition

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-STATE-ZIP

V D
Jorge Luis del Rosal
2100 Biscayne Blvd.
Miami, FL 33137

☒ Change ☐ Addition

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-STATE-ZIP

V D
Michel Recalt
2100 Biscayne Blvd.
Miami, FL 33137

☒ Change ☐ Addition

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-STATE-ZIP

SD
Frederick J. Wilson III
2100 Biscayne Blvd.
Miami, FL 33137

☒ Change ☐ Addition

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-STATE-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-STATE-ZIP

☐ Change ☐ Addition

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 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or in an attachment with an address.

SIGNATURE:

Frederick J. Wilson III

3/14/97

(305) 573-8511

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0167004

CR2E034 (9/96)