

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

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98 MAY 12 AM 10:42

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # F96000005632
1. Corporation Name
Beverages & More, Inc.

Principal Place of Business: **1470 Enea Circle Suite 1600 Concord, CA 94520**
Mailing Address: **1470 Enea Circle Suite 1600 Concord, CA 94520**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	4. FET Number	Applied For
21	26	68-0319504	Not Applicable
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
23. City & State	28. City & State	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24. Zip	29. Zip	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Country	Country		
25	30		

9. Name and Address of Current Registered Agent
**Sy Chadroff, Esq.
CHADROFF, TERMINELLO & TERMINELLO
2700 S.W. 37 Avenue
Miami, Florida 33133**

10. Name and Address of New Registered Agent

81 Name	Louis J. Terminello
82 Street Address (P.O. Box Number is Not Acceptable)	CHADROFF, TERMINELLO & TERMINELLO
83	2700 S.W. 37 Avenue
84 City	Miami
85 Zip Code	FL 33133

11. Pursuant to the provisions of Sections 607.0532 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]* (NOTE: Registered Agent signature required when registering) DATE: **5/11/98**

12. OFFICERS AND DIRECTORS

TITLE	Director, Chairman <input type="checkbox"/> DELETE
NAME	Steven Boone
STREET ADDRESS	1470 Enea Circle, Suite 1600
CITY-ST-ZIP	Concord, California 94520
TITLE	Vice-Pres, Sec <input type="checkbox"/> DELETE
NAME	Steven McLaren
STREET ADDRESS	1470 Enea Circle, Suite 1600
CITY-ST-ZIP	Concord, California 94520
TITLE	President, CEO, Director <input type="checkbox"/> DELETE
NAME	Bannus B. Hudson
STREET ADDRESS	1470 Enea Circle, Suite 1600
CITY-ST-ZIP	Concord, California 94520
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	900002522459-4
2.4 CITY-ST-ZIP	-05/13/98--01110--019
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	****150.00 ****150.00
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* Work: (925) 609-6017

CF2E034 (10/97)