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

PROFIT CORPORATION ANNUAL REPORT

P. O. BOX 049001. #25-3 CHICAGO IL 80804-9001



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P. O. BOX 049001. #25-3 CHICAGO IL 60604-9001

F9400000146 (0) DOCUMENT

SNAPPLE BEVERAGE CORP.

Mailing Address Principal Place of Business 321 N. CLARK STREET 321 N. CLARK STREET

			11/29/1993		
2. Principal Place of Business	2a. Mailing Address	W-1	4. FEI Number	Applied For	
709 Westchester Avenue			04-3149065	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22	27			Fee Required	
City & State City & State City & State 28 White Plains, NY 28 White Plains,		o NV	6. Election Campaign Financing	\$5.00 May Be	
23 White Plains, NY Zip Country	Zip White Plair	Country	Trust Fund Contribution	Added to Fees	
24 10604 25 US	29 10604	30 US	 This corporation owes or has paid the corporation owes or has paid the corporation. Personal Property Tax due June 30. 	Jrrent year Intangible Yes No	
9. Name and Address of Current		30 00	10. Name and Address of New Registered		
C T CORPORATION SYSTEM					
1200 S. PINE ISLAND RD.			B2 Creek Address (D.O. Day Number in Not Assentable)		
PLANTATION FL 33324		82 Street Ad	82 Street Address (P.O. Box Number is Not Acceptable)		
i Ballulatt i c aact					
		B4 City	FI	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.					
*	ons or, occiton cor.coos, i k	maa olalaks.			
SIGNATURE Signature typed or pointed naive of registered agent	and title if applicable (NOT)	Registered Agent signature re	oquired when reinstaling) DATE		
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN		
TITLE CD	₹ DELETE	1.1 TITLE	PD	Change X Addition	
NAME DOYLE, JAMES F		1.2 NAME	Ernest J. Cavallo		
STREET ADDRESS 321 N. CLARK ST.		1.3 STREET ADDRESS	709 Westchester Avenue	•	
CITY-ST-ZIP CHICAGO IL		1.4 CITY-ST-ZIP	White Plains, NY 10604		
TITLE PD	₹ DEL ETE	2.1 TITLE	V Robert J. Crowe	Change 🔼 Addition	
NAME UZZI, DONALD R		2.2 NAME			
STREET ADDRESS 321 N. CLARK ST.		2.3 STREET ADDRESS	280 Park Avenue		
CITY-ST-ZIP CHICAGO IL		2. 4 CITY - ST - ZIP	New York, NY 10017		
TITLE	DELETE.	3.1 TITLE	V Richard Allen	Change K Addition	
NAME COOPER, JANET		3.2 NAME	709 Westchester Avenue		
STREET ADDRESS 321 N. CLARK ST.		3.3 STREET ADDRESS			
CHICAGO IL	N proper	3.4. CITY-ST-7IP	White Plains, NY 10604	Observe DD 44485-	
TITLE V	X DELETE	4.1 TITLE	T Thomas E. Shultz	Change Addition	
NAME GETTINGS, THOMAS L		4. 2 NAME	280 Park Avenue		
STREET ADDRESS 321 N. CLARK ST.		4.3 STREET ADDRESS	New York, NY 10017		
CITY-ST-ZIP CHICAGO IL	X DELETE	4.4 CITY - ST - ZIP	0	Change X Addition	
TITLE V NAME JARTZ, JOHN G	EV DECEIG	5.1 TITLE	Stuart I. Rosen	Fill pliquide FE Worldout	
DOA N. OLADIZ OT		5.2 NAME	280 Park Avenue		
CHICAGO II		5.3 STREET ADDRESS	New York, NY 10017		
0.11 07 67	DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change X Addition	
TITLE V NAME KOSS, ALAN	בש מנונונ	6.2 NAME	D Michael F. Weinstein	T outside RT September	
ANA NI OLADIZ OT		6.3 STREET ADDRESS	709 West:hester Avenue		
OUICAGO II					
CITY-ST-ZIP CHICAGO IL 14. I hereby certify that the information supplied with) this filing does not qualify fo	6.4 City-St-ZIP or the exemption stated	White Plains, NY 10604	certify that the information	

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 or an all chinent with an address.

When 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 all chinent with an address.

FILED

May 01 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified