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May 07 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 # 155746

(1)

1. Corporation Name

SOUTHERN BEVERAGE JOURNAL, INC.

STERNLITE CORP

Principal Place of Business

9361 SW 130 STREET
MIAMI FL 33176-5763
US

Mailing Address

9361 SW 130 STREET
MIAMI FL 33176-5763
US

3. Date Incorporated or Qualified
08/18/1948

3a. Date of Last Report
04/23/1996

4. FEI Number
59-0587921

Applied For
Not Applicable

6. 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

2. Principal Place of Business

21 13225 SW 88 AVE

Suite, Apt. #, etc.

22 City & State

23 MIAMI FL

24 Zip 33176

Country US

2a. Mailing Address

26 P O BOX 560460

Suite, Apt. #, etc.

27 City & State

28 MIAMI FL

29 Zip 33256

Country VS

9. Name and Address of Current Registered Agent

LEVIN, ELIOT
9361 SW 130 STREET
MIAMI FL 33176

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

10901 SW 67 CT

83

84 City

MIAMI FL

FL

85 Zip Code

33156

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-28-97

12. OFFICERS AND DIRECTORS

TITLE PD
NAME LEVIN, ELIOT
STREET ADDRESS 9361 SW 130 STREET
CITY- ST- ZIP MIAMI FL 33176-5763

TITLE SD
NAME LEVIN, LINDA
STREET ADDRESS 9361 SW 130 STREET
CITY- ST- ZIP MIAMI FL 33176-5763

TITLE TD
NAME LEVIN, LINDA
STREET ADDRESS 9361 SW 130 STREET
CITY- ST- ZIP MIAMI FL 33176-5763

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 10901 SW 67 CT
1.4 CITY- ST- ZIP MIAMI FL 33156-3916

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 10901 SW 67 CT
2.4 CITY- ST- ZIP MIAMI FL 33156-3916

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS 10901 SW 67 CT
3.4 CITY- ST- ZIP MIAMI FL 33156-3916

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

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

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS 700002180137
6.4 CITY- ST- ZIP -05/15/97--01085--021
***165.00

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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-97 305/2596066

Date Daytime Phone

CR2E034 (9/96)