

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 JAN 30 AM 6:54

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DD

DOCUMENT # 280155

(3)

1. Corporation Name

CAWY BOTTLING CO

Principal Place of Business

**2440 NW 21 TERRACE
MIAMI FL 33142**

Mailing Address

**2440 NW 21 TERRACE
MIAMI FL 33142**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
04/07/1964

3a. Date of Last Report
02/15/1994

4. FEI Number
59-1055754

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

22. City & State

23

27. City & State

28

24. Zip

25. Country

29. Zip

30. Country

9. Name and Address of Current Registered Agent

**LOPEZ, PETER M
28 W FLAGLER ST
MIAMI FL 33130**

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signatures required when renouncing)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**SD
VILLALBA, MIGUEL
7215 S.W. 21ST ST.
MIAMI FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**PD
COSSIO, VINCENT
5876 S.W. 16 ST.
MIAMI FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**TD
GARCIA, FRANK
9341 COLLINS AVE., APT. 602
SURFIDE FL**

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
1.4 CITY - ST - ZIP

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

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

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
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

**900001395089
-02/01/95--01047--007**

******200.00 ****200.00**

☐ Change ☐ Addition

☐ Change ☐ Addition

T/S 1/30/95

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 107, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Francis Corio
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 19/1995 6348669
(Date) (Signature) (Filing Number)