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Feb 11 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 # 553755

(0)

1. Corporation Name

GLACIER SPRINGS WATER CO.

PAID



Principal Place of Business

3545 N.W. 110TH STREET
P.O. 680280 (ZIP 33168)
MIAMI FL 33167

Mailing Address

3545 N.W. 110TH STREET
P.O. 680280 (ZIP 33168)
MIAMI FL 33167

FEB 03 1997

BEVERAGE CANNERS INTL CORP.
MIAMI, FLORIDA 33167

3. Date Incorporated or Qualified

09/28/1977

3a. Date of Last Report

03/15/1996

2. Principal Place of Business

21 3545 NW 110 Street

2a. Mailing Address

26 3545 NW 110 Street

4. FEI Number

58-2311443

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

8. This corporation has liability for intangible tax Under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BEVERAGE CANNERS INTERNATIONAL CORP.

3550 N.W. 110 S.T.
MIAMI FL 33167

81 Name

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

3545 NW 110 Street

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 signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP ☐ DELETE

NAME SHURMAN, JOHN
STREET ADDRESS 3550 NW 110 ST
CITY-ST-ZIP MIAMI, FL 00000

1.1 TITLE ☐ Change ☐ Addition

TITLE V ☐ DELETE

NAME SLOCUM, JOHN D.
STREET ADDRESS 3550 N. W. 110TH ST.
CITY-ST-ZIP MIAMI FL

2.1 TITLE ☐ Change ☐ Addition

TITLE V ☐ DELETE

NAME KIRKMAN, PAUL
STREET ADDRESS 3550 NW 110 ST.
CITY-ST-ZIP MIAMI FL

3.1 TITLE ☐ Change ☐ Addition

TITLE V ☐ DELETE

NAME VAUPEN, HY
STREET ADDRESS 3550 NW 110 ST
CITY-ST-ZIP MIAMI FL

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E034 (9/96)