

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **647144** (5)

1. Corporation Name

**FLORIDA SUNSHINE BEVERAGES, INC.**



Principal Place of Business

Mailing Address

**3315 N.E. 15TH STREET  
FORT LAUDERDALE FL 33304**

**3315 N.E. 15TH STREET  
FORT LAUDERDALE FL 33304**

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

**12/05/1979**

3a. Date of Last Report

**03/07/1995**

4. FEI Number

**59-1974510**

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

9. Name and Address of Current Registered Agent

**HOULE, ANNE MCCORMACK  
3315 N.E. 15TH STREET  
FORT LAUDERDALE FL 33304**

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 of the person executing the report and the corporation

NOTE: Registered Agent signature required on this filing

DATE

12. OFFICERS AND DIRECTORS

TITLE  DELETE

NAME: **TVD HOULE, AMY A**  
STREET ADDRESS: **3315 NE 15TH STREET**  
CITY, ST, ZIP: **FORT LAUDERDALE FL**

TITLE  DELETE

NAME: **PVS HOULE, ANNE MCCORMACK**  
STREET ADDRESS: **3315 NE 15TH STREET**  
CITY, ST, ZIP: **FORT LAUDERDALE FL**

TITLE  DELETE

NAME:  
STREET ADDRESS:  
CITY, ST, ZIP:

TITLE  DELETE

NAME:  
STREET ADDRESS:  
CITY, ST, ZIP:

TITLE  DELETE

NAME:  
STREET ADDRESS:  
CITY, ST, ZIP:

TITLE  DELETE

NAME:  
STREET ADDRESS:  
CITY, ST, ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE  Change  Addition

12 NAME:  
13 STREET ADDRESS:  
14 CITY, ST, ZIP:

21 TITLE  Change  Addition

22 NAME:  
23 STREET ADDRESS:  
24 CITY, ST, ZIP:

31 TITLE  Change  Addition

32 NAME:  
33 STREET ADDRESS:  
34 CITY, ST, ZIP:

41 TITLE  Change  Addition

42 NAME:  
43 STREET ADDRESS:  
44 CITY, ST, ZIP:

51 TITLE  Change  Addition

52 NAME:  
53 STREET ADDRESS:  
54 CITY, ST, ZIP:

61 TITLE  Change  Addition

62 NAME:  
63 STREET ADDRESS:  
64 CITY, ST, ZIP:

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 119.07(3)(k), 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 change or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*[Handwritten Signature]*

1/30/96

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