

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 01, 1999 8:00 am  
Secretary of State

03-01-1999 90205 008 \*\*\*150.00

DOCUMENT # 688197

1. Corporation Name  
INTERNATIONAL BEVERAGES, INC.

Principal Place of Business  
2631 E OAKLAND PARK BLVD  
P O BOX 39243  
FORT LAUDERDALE FL 33306

Mailing Address  
2631 E OAKLAND PARK BLVD  
P O BOX 39243  
FORT LAUDERDALE FL 33306

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/18/1980

4. FEI Number

59-2039750

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 owes the current year Intangible  
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

CASE, ANNE HOULE  
3315 NE 15TH ST  
FT. LAUDERDALE FL 33304

10. Name and Address of New Registered Agent

81 Name AMY HOULE CUMMING  
82 Street Address (P.O. Box Number is Not Acceptable)  
5601 N. POWERLINE ROAD  
83 #106  
84 City FT LAUDERDALE FL 85 Zip Code 33309

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)

1/29/99  
DATE

12. OFFICERS AND DIRECTORS

| TITLE | NAME            | STREET ADDRESS        | CITY-ST-ZIP         | DELETE                              |
|-------|-----------------|-----------------------|---------------------|-------------------------------------|
| D     | HOULE, ANNE C   | 2631 E. OAKLAND BLVD. | FT LAUDERDALE, FL 0 | <input checked="" type="checkbox"/> |
| SDV   | HOULE, AMY ANNE | 2631 E. OAKLAND BLVD. | FT LAUDERDALE, FL 0 | <input checked="" type="checkbox"/> |
| PT    | HOULE, ANNE C   | 2631 E. OAKLAND BLVD. | FT LAUDERDALE, FL 0 | <input checked="" type="checkbox"/> |
|       |                 |                       |                     | <input type="checkbox"/>            |
|       |                 |                       |                     | <input type="checkbox"/>            |
|       |                 |                       |                     | <input type="checkbox"/>            |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 1.1 TITLE          | 1.2 NAME          | 1.3 STREET ADDRESS          | 1.4 CITY-ST-ZIP         | Change                              | Addition                            |
|--------------------|-------------------|-----------------------------|-------------------------|-------------------------------------|-------------------------------------|
| PRESIDENT/DIRECTOR | STEVE CHAMBERS    | 5601 N. POWERLINE RD #106   | FT LAUD FL 33309        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| SEC/TREAS/DIRECTOR | AMY HOULE CUMMING | 5601 N. POWERLINE RD #106   | FT LAUDERDALE, FL 33309 | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| VICE PRESIDENT     | DAVID HOULE       | 5601 N. POWERLINE ROAD #106 | FT LAUD, FL 33309       | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| VICE PRESIDENT     | BRENDA OLIVER     | 5601 N. POWERLINE ROAD #106 | FT LAUD, FL 33309       | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
|                    |                   |                             |                         | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                    |                   |                             |                         | <input type="checkbox"/>            | <input type="checkbox"/>            |

14. I 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/29/99 (954) 491-0004

CR2E034 (11/98)