2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2006 8:00 am
Secretary of State
01-27-2006 90023 016 ***158.75

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1. Entity Name
COTT BEVERAGES INC.

60006911

Principal Place of Business	Mailing Address
4211 W BOY SCOUT BLVD 290 TAMPA, FL 33607	4211 W BOY SCOUT BLVD 290 TAMPA, FL 33607

01092006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 58-1947565 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP O'KEEFFE, EDMUND 207 QUEENS QUAY W, #340 TORONTO, ONT., CANADA,	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CFO + EVP CLYDE PRESLAR 4211 W. BOYSCOUT BLVD. # 290 TAMPA FL 33607	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO SHEPPARD, JOHN 4211 W BOY SCOUT BLVD TAMPA, FL 33607	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	EVP MARK BENADIBA 4211 W. BOYSCOUT BLVD. # 290 TAMPA FL 33607	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPSD HALPERIN, MARK 207 QUEENS QUAY W, #340 TORONTO, ONTARIO CANADA,	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SR. VP COLIN WALKER 207 QUEEN'S QUAY W. # 340 TORONTO, ONT CANADA M5J 1A7	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P FLAHERTY, ROBERT J 4211 W. BOYSCOTT BLVD SUITE 290 TAMPA, FL 33607	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP-SALES+MKTG. JOHN DENNEHY 4211 W. BOYSCOUT BLVD. # 290 TAMPA, FL 33607	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	EVPD SILCOCK, RAYMOND P M5JIA7 TORONTO ONTARIO, CA	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ASST. SECTY MATTHEW A. KANE, JR., ESQ. 4211 W. BOYSCOUT BLVD. # 290 TAMPA FL 33607	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPT BRENNAN, CATHERINE 207 QUEENS QUAY W, #340 TORONTO ONTARIO, CA m5jia7	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP + ASST. SECTY TINA DELL'AQUILA 207 QUEEN'S QUAY W. # 340 TORONTO, ONT, CANADA M5J 1A7	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Matthew A. Kane. 1/26/06 813-313-1800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

MATTHEW A. KANE, JR., ESQ. ASST. SECTY