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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

	1996	DIVISION OF (	CORPORATIONS		
DOCUI	MENT # F9400	00001412 (5	)		
B.S.R	.M., INC.			I (BBI) BB bird (G)Al B(B) ( GB) ( GB)	
Principal Place	of Business	Mailing Address			
UKIAH CA	B RANCH RD 95482	2350 MCNAB RANCH I UKIAH CA 95482	RD.		
US				3. Date incorporated or Qualified 03/21/1994	3e. Date of Last Report 03/28/1995
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# ptc	26   Suite, Apt. #, etc.		93-1004918	Not Applicable
2	r, 610.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	;	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
	Country	Zip	Country	8. This corporation has liability for	intangible tax under s 199.032,
4	9. Name and Address of Curren	29	30	Florida Statutes Yes  10. Name and Address of New F	□ No
3700 C	ER BEVERAGE CO OMMERCE PARKWAY AR FL 33025		82 Street A 858 83	ry Moore dba Eastern S Address (P.O. Box Number is Not Acceptat 6 Larwin Ln. #3	olo)
			84 City Orla	ndo	FL   85   Zip Code 32817
	Jerry Moore Signature, typed or pointed name of registered agent	ः कार्योगस्ति अनुस्थितसम्बद्धाः (NO)	Heat should Apply Signature to	pporation submits this statement for the purpoard of directors. Thereby accept the app	2-7-46 DA'E
TILE	Р	DELETE	1. 1 THLE	Р	Change
NAME	BACCALA, WILLIAM		1.2 NAME	Baccala, William	
STREET ADDRESS	3460 HAPPY VALLEY AVE.		1.3 STREET ADDRESS	2052 McNab Ranch Rd.	
CITY-ST-ZIP TITLE	SANTA ROSA CA 95404 V	<b>€</b> T DELETE	2 1 JULE	Ukiah, CA 95482 V	Change Addition
NAME	BACCALA, ROBERT	K) better	2 1 11 CF 2 2 NAME	Waltham, Ruby	K Cusins [] vaccion
STREET ADDRESS	2445 PASEO CIRCULO		2.3 STHEET ADDRESS	2052 McNab Ranch Rd.	
011Y - \$1 - 7IP	TUSTIN CA 92680		2 4 CITY - ST - 7IP	Ukiah, CA 95482	
TITLE	S	DELETE	3 1 TITLE		Change Addition
NAME	SITUM, STEVE		3 2 NAME		
STREET AUDRESS CITY-ST-ZIP	4 FRIAR LN. SAN RAFAEL CA 94901		3.3 STREET ADDRESS		
TITLE	SAN RAFAEL CA 94901	☐ DELETE	3.4 CHY-ST-Z-P 4.1 THE	24.00.00.00.00.00.00.00.00.00.00.00.00.00	of the transper Addition
NAME		J	4.2 NAME	2000017: -03/19/96—01(	075035
STREET ADDRESS			4.3 STREET ADDRESS	***200.00	· · · · · · · · · · · · · · · · · · ·
City-St-ZiP			4 4 CITY - ST - ZIF		
TITLE		☐ DELETE	5 1 TITLE		Change Addition
NAME			5 2 NAME		
\$1REET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	5 4 C(1Y - S1 - Z(P) 6 1 T() L F		Change Addition
NAME			6.2 NAME		N 2 AUDITOR
STREET ADDRESS			6.3 STREET ADDRESS		13-17
CITY - ST - ZIP			6.4 CITY - S1 - ZIP		
	v certify that the information supplied y	vith this filing is voluntarily furn's		by for the exemution stated in Section 119	07/3/lk) Florida Statutes I further

I do hereby certify that the information supplied with this filling 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 changes or on an attachment with an address.

William P. Baccala

SIGNATURE:

William P. Baccala

Object 19 Object

SIGNATURE: