FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED
AND
FILED

'95 MAR -6 AM 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F94000006545 (7)**

1. Corporation Name

BUENOS AIRES EMBOTELLADORA, S.A.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business	Mailing Address
700 SOUTH FEDERAL HIGHWAY 2ND FLOOR BOCA RATON FL 33432	700 SOUTH FEDERAL HIGHWAY 2ND FLOOR BOCA RATON FL 33432

3. Date Incorporated or Qualified: **12/21/1994**
3a. Date of Last Report:

2. Principal Place of Business — 21:
2a. Mailing Address — 26:
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28:
Zip — 24:
Country — 25:
Zip — 29:
Country — 30:

4. FEI Number: **98-0138065** ☐ 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	10. Name and Address of New Registered Agent
CORPORATION INFORMATION SERVICES, INC. 1201 HAYS STREET TALLAHASSEE FL 32301	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 _____ (NOTE: Registered Agent signature required when executing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '95	
TITLE	YCD	11 TITLE	☐ Change ☐ Addition
NAME	BEACH, CHARLES H	12 NAME	
STREET ADDRESS	700 SOUTH FEDERAL HIGHWAY, 2ND FLOOR	13 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	14 CITY-ST-ZIP	
TITLE	VD	21 TITLE	☐ Change ☐ Addition
NAME	TIMOTHY, C L	22 NAME	
STREET ADDRESS	700 SOUTH FEDERAL HIGHWAY, 2ND FLOOR	23 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	24 CITY-ST-ZIP	
TITLE	V	31 TITLE	☐ Change ☐ Addition
NAME	MORENO, RICARDO	32 NAME	
STREET ADDRESS	1437 BUENOS AIRES ARGENTINA	33 STREET ADDRESS	
CITY-ST-ZIP	ARGENTINA	34 CITY-ST-ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	GERRITS, MICHAEL J	42 NAME	
STREET ADDRESS	700 SOUTH FEDERAL HIGHWAY 2ND FLOOR	43 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	44 CITY-ST-ZIP	
TITLE	V	51 TITLE	☐ Change ☐ Addition
NAME	KEAVNEY, JAMES C	52 NAME	
STREET ADDRESS	700 SOUTH FEDERAL HIGHWAY, 2ND FLOOR	53 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	54 CITY-ST-ZIP	
TITLE	D	61 TITLE	☐ Change ☐ Addition
NAME	ODELL, LAWRENCE	62 NAME	
STREET ADDRESS	POPULAR CENTER 16TH FLOOR	63 STREET ADDRESS	
CITY-ST-ZIP	HATO REY, PUERTO RICO	64 CITY-ST-ZIP	

14. I (We) 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)(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 the 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.

SIGNATURE: _____ 2/28/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

0001868 FP