

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

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Mar 07 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F94000006545 (7)

1. Corporation Name
BUENOS AIRES EMBOTELLADORA, S.A.



Principal Place of Business 700 SOUTH FEDERAL HIGHWAY 2ND FLOOR BOCA RATON FL 33432	Mailing Address 700 SOUTH FEDERAL HIGHWAY 2ND FLOOR BOCA RATON FL 33432-6114
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3. Date Incorporated or Qualified 12/21/1994	3a. Date of Last Report 05/01/1996
4. FEI Number 98-0138065	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 700 SOUTH FEDERAL HWY Suite, Apt. #, etc. 22 SUITE 100 City & State 23 BOCA RATON FL Zip 24 33432	2a. Mailing Address 26 700 SOUTH FEDERAL HWY Suite, Apt. #, etc. 27 SUITE 100 City & State 28 BOCA RATON FL Zip 29 33432
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9. Name and Address of Current Registered Agent CORPORATION INFORMATION SERVICES, INC. 1201 HAYS STREET TALLAHASSEE FL 32301	10. Name and Address of New Registered Agent <table border="1"> <tr><td>81 Name</td></tr> <tr><td>82 Street Address (P.O. Box Number is Not Acceptable)</td></tr> <tr><td>83</td></tr> <tr><td>84 City</td></tr> <tr><td>85 Zip Code</td></tr> </table>	81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
81 Name						
82 Street Address (P.O. Box Number is Not Acceptable)						
83						
84 City						
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 reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE YCD	<input type="checkbox"/> DELETE	1.1 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BEACH, CHARLES H		1.2 NAME BEACH, CHARLES H	
STREET ADDRESS 700 SOUTH FEDERAL HIGHWAY, 2ND FLOOR		1.3 STREET ADDRESS 700 SOUTH FEDERAL HWY, SUITE 100	
CITY-ST-ZIP BOCA RATON FL		1.4 CITY-ST-ZIP BOCA RATON, FL 33432	
TITLE VD	<input checked="" type="checkbox"/> DELETE	2.1 TITLE YCD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME TIMOTHY, C L		2.2 NAME SUAREZ, LUIS	
STREET ADDRESS 700 SOUTH FEDERAL HIGHWAY, 2ND FLOOR		2.3 STREET ADDRESS 308 ROQUE SAENZ PENA	
CITY-ST-ZIP BOCA RATON FL		2.4 CITY-ST-ZIP 1642 BUENOS AIRES ARGENTINA	
TITLE V	<input checked="" type="checkbox"/> DELETE	3.1 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MORENO, RICARDO		3.2 NAME MORENO, RICARDO	
STREET ADDRESS 1437 BUENOS AIRES ARGENTINA		3.3 STREET ADDRESS 308 ROQUE SAENZ PENA	
CITY-ST-ZIP ARGENTINA		3.4 CITY-ST-ZIP 1642 BUENOS AIRES ARGENTINA	
TITLE D	<input checked="" type="checkbox"/> DELETE	4.1 TITLE VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME GERRITS, MICHAEL J		4.2 NAME BANOS, OSVALDO	
STREET ADDRESS 700 SOUTH FEDERAL HIGHWAY 2ND FLOOR		4.3 STREET ADDRESS 308 ROQUE SAENZ PENA	
CITY-ST-ZIP BOCA RATON FL		4.4 CITY-ST-ZIP 1642 BUENOS AIRES ARGENTINA	
TITLE T	<input type="checkbox"/> DELETE	5.1 TITLE T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME STOWELL, STEVEN A		5.2 NAME STOWELL, STEVEN A	
STREET ADDRESS 700 S FED HWY 2ND FLOOR		5.3 STREET ADDRESS 700 SOUTH FEDERAL HWY SUITE 100	
CITY-ST-ZIP BOCA RATON FL		5.4 CITY-ST-ZIP BOCA RATON, FL 33432	
TITLE D	<input checked="" type="checkbox"/> DELETE	6.1 TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME ODELL, LAWRENCE		6.2 NAME GARRIDO, ENRIQUE	
STREET ADDRESS POPULAR CENTER 18TH FLOOR		6.3 STREET ADDRESS MAIPU 1300	
CITY-ST-ZIP HATO REY, PUERTO RICO		6.4 CITY-ST-ZIP 1006 BUENOS AIRES ARGENTINA	

14. I do 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 and 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 its 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 from an attachment with an address.

SIGNATURE: _____ **OSVALDO BANOS** 2/24/97 011 (541) Argentina 747-8517
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

D
Jung, Craig
800 Fairway Drive, Suite 400
Deerfield Beach, FL 33441

D
Peter R. Thompson
One Pepsi Way
Somers, NY 10589

D
Michael White
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