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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # F9700000795 (1)

AQUA CLARA BOTTLING & DISTRIBUTION, INC.

## **FILED** Mar 16 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					T (400)160 (518 1919) 10811 98111 88111 88111 88111 88111 88111 88111 88111 88111 88111 88111 88111 88111 8811	
10720 72ND STREET NORTH 10720 72ND STREET NORT LARGO FL 33777-1518 LARGO FL 33777-1518				TH		DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						02/13/1997
2. Principal Place of Business 2a. M			Mailing Address			4, FEI Number Applied For
21		26				84-1352529   Not Applicable
Suite, Apt. #, etc. 27						5. Certificate of Status Desired Fee Required
City & State	•	City & S 28	tate			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip		Country	<b>,</b>	8. This corporation owes or has paid the current year Intangible
24	25	29		30		Personal Property Tax due June 30. Yes No
	g. Name and Address of Curre	nt Registered Ag	ent	81	<b>.</b>	10. Name and Address of New Registered Agent
	AVOY, JOHN S			81	Name	
10720 72ND STREET NORTH LARGO FL 33777-1518			82	Street A	Address (P.O. Box Number is Not Acceptable)	
	. )	1		83		
				84	City	FL 85 Zip Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607.05 egistered agent, or train, in the Section familiar with and second the obli	02 and 607.1508, e of Florida. Such gations of Section	Florida Statute change was at 607.0505, Flor	is, the abov uthorized b rida Statute	e-named y the corp s.	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or pyrind name of registered a	and ed tille if emplicable	(NOIE:	· Bagistared &g	ant signature	required when reinstating) DATE
12.		ND DIRECTORS	(1401)	13.	on algrenary	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PC		DELETE	1.1 TITLE		Change Addition
NAME	MCAVOY, JOHN S			1.2 NAME	i	
STREET ADDRESS	1993 WHITNEY WAY			1.3 STREE	ADDRESS	
CITY-ST-ZIP	CLEARWATER FL 34620			1.4 CITY-5	T-ZIP	
TITLE	Ť		DELETE	2.1 TITLE		Teante Paulo Change Addition
NAME	BECK, MARIJO			2.2 NAME	ĺ	GRAGIANIA WALER LN
STREET ADDRESS	2239 PINNACLE CIRCLE NO	RTH		2.3 STREE	ADORESS	802 SANI WATER
CITY-ST-ZIP	PALM HARBOR FL 34684			2.4 CITY-	ST-ZIP	TOLAY, KAND Change Addition BOR SAND WATER LN OKISMAR FL 34677
TITLE	Ď		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	PLUNKETT, JOHN C			3.2 NAME		
STREET ADDRESS	201 LAGOON DRIVE			3.3 STREE	ADDRESS	
CITY-ST-ZIP	PALM HARBOR FL 34683			3.4 CITY-	ST-ZIP	
TITLE			DELETE	4.1 TITLE		Change Addition
NAME				4. 2 NAME		
STREET ADDRESS				4.3 STREET	ADDRESS	
CITY-ST-ZIP				4.4 CITY - 9	T-ZIP	
TITLE			DELETE	5.1 TITLE	}	☐ Change ☐ Addition
NAME				5.2 NAME	1	
STREET ADDRESS				5.3 STREET	ADDRESS	
CITY-ST-ZIP				5.4 CITY - 5	T-ZIP	
TITLE			DELETE	6.1 TITLE	1	Change L Addition
NAME				6.2 NAME	1	
STREET ADDRESS		/		6.3 STREET	ADDRESS	
CITY-ST-ZIP				6.4 CITY-5		
14. I hereby c	ertify that the information supplied	with this time does	not qualify for	r the exemp	tion state	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information

indicated on this annual report or supplemental angular proof 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 receiper or trestee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed are on any place ment with an address.