## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# J34292

Entity Name: PASCO BEVERAGE COMPANY

FILED Aug 14, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1500 CITRUS COUNTRY DR 1111 MCMULLEN BOOTH RD.

SUITE 202 SUITE A

DADE CITY, FL 335232401 CLEARWATER, FL 33759 US

Current Mailing Address: New Mailing Address:

P.O. BOX 97 P.O. BOX 16946

DADE CITY, FL 335260097 CLEARWATER, FL 337666946 US

FEI Number: 59-2721774 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

REESE, BEN

1500 CITRUS COUNTRY DR

SUITE 202

DADE CITY, FL 335232401 US

GOLSON, GREGORY ESQ.

110 EAST MADISON ST.

SUITE 200

TAMPA, FL 336024700 US

DABL 0111, 1E 000202401 00 TAMIA, 1E 000024700 0

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.

SIGNATURE: GREGORY GOLSON 08/14/2006

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO () Delete Title: CEO (X) Change () Addition

Name: REESE, BEN Name: REESE, BEN

Address: 1500 CITRUS COUNTRY DR SUITE 202 Address: 111 MCMULLEN BOOTH RD., SUITE A City-St-Zip: DADE CITY, FL 335233401 City-St-Zip: CLEARWATER, FL 33759 US

Title: CFO ( ) Delete Title: D (X) Change ( ) Addition

Name: SONTHEIMER, JACK Name: VILJOEN, GARY

 Address:
 1500 CITRUS COUNTRY DR SUITE 202
 Address:
 2181 CHESTNUT FOREST DR.

 City-St-Zip:
 DADE CITY, FL 335232401
 City-St-Zip:
 TAMPA, FL 33618 US

Title: D (X) Delete Title: ( ) Change ( ) Addition Name: VILJOEN, GARY Name:

 Name:
 VILJOEN, GARY
 Name:

 Address:
 2181 CHESTNUT FOREST DR
 Address:

 City-St-Zip:
 TAMPA, FL 33618
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BEN REESE CEO 08/14/2006