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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M11338

Corporation GOURME	T WATER COMPANY, INC.					
	·					
Principal Place	e of Business	Mailing Address		T (BRICANI) sen senar sinana renan cinan sans menan	BIBN BIBN SIBN BN	Bir Arsır I zar
916 NE 20TH AVENUE PO BOX 7462						
FT. LAUDERDALE FL 33304 FT LAUDERDALE FL 33338				DO NOT WRITE IN THI	C CDACE	
				3. Date Incorporated or Qualifed -	3 SFACE	
				02/14/1985		
2 Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	App	lied For
21	lade of Basiliess	26		59-2497131		Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Ac	ditional
22		27	عمضت ويسمند	5. Certificate of Status Desired	Fee Req	uired
City & State	0	City & State		6. Election Campaign Financing	\$5.00 N	· .
23	w. w	28		Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Country	8. This corporation owes the current year in		□No
24	25	29 30	<u>) </u>	Personal Property Tax. 10. Name and Address of New Registered		-1NO
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Augisteres	7 Ageilt	
LEBEL, ALBERT B						
17274 BOCA CLUB ROAD			82 Street Add	ress (P.O. Box Number is Not Acceptable)		
APT. 2305			83			
😤 🕆 BOCA RATON FL 33487					·	
	_		84 City	F	85 Zip C	ode Section 1
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						
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Such change was auth ons of, Section 607,0505, Florida	a Statutes.		ointment as reg	stered
SIGNATURE		Frey, ALBERT		41	t.o/99	}
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered Agent signature require			
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTOR Change	Addition
TITLE	SD	☐ DELETE	1.1 TITLE		Criange	
NAME	LEBEL, FELIX		1.2 NAME			Ì
STREET ADDRESS	PO BOX 7462 ((N//A))		1.3 STREET ADDRESS			ĺ
CITY-ST-ZIP	FT. LAUDERDALE FL 33338	☐ DELETE	1.4 CITY-ST-ZIP		Change	Addition
TITLE	LEBEL, ALBERT	C DELEVE	2.2 NAME			
NAME	17274 BOCA CLUB BLVD., APT.	2305	2.3 STREET ADDRESS	·		
STREET ADDRESS CITY-ST-ZIP	BOCA RATON FL 33487	2000	2.4 CITY-ST-ZIP	* * *		
TITLE	BOOK INTOKER CO.O.	☐ DELETE	3.1 TITLE		Change	Addition
NAME		_	3.2 NAME			
STREET ADDRESS		,	3.3 STREET ADDRESS			}
CITY-ST-ZIP			3.4. CITY+ST+ZIP			
TITLE		☐ DELETE	4.1 TITLE	* 1.7810*** ·	☐ Change	Addition
NAME			4. 2 NAME			
STREET ADORESS	·		4.3 STREET ADDRESS	,		
CITY-ST-ZIP			4.4 CITY-ST-ZIP	• -		
TITLE		☐ DELETÉ	5.1 TITLE		☐ Change	☐ Addition
NAME			5.2 NAME	-		
STREET ADDRESS			5.3 STREET ADDRESS			}
CITY-\$T-ZIP			5.4 CITY-ST-ZIP	1 1000		- Addistan
TER E	lanca.	וווי אוני בדב	6 1 TITLE	•	Change	☐ Addition f

CITY-ST-ZIP 14. I 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 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 changed, or on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90073 005 ***150.00