

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

**APPROVED
AND
FILED**

55 MAY -1 AM 7:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M66183 (8)
1. Corporation Name
DIVERSIFIED REFRESHMENTS, INC.

Principal Place of Business Mailing Address
**43 CEDAR DUNES DR.
NEW SMYRNA BEACH FL 32169** **43 CEDAR DUNES DR.
NEW SMYRNA BEACH FL 32169**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Created **01/25/1988** 3a. Date of Last Report **05/01/1994**
4. FEI Number **59-2873250** 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**
7. This corporation has liability for charitable contributions under § 1209.020, Florida Statutes Yes No

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

9. Name and Address of Current Registered Agent
**HALL, MARK
221 N. CAVAWAY
NEW SMYRNA BEACH FL 32168**

10. Name and Address of New Registered Agent
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 607.05(4) and 607.15(4), Florida Statutes, the above named corporation submits the 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 Sections 607.05(4) and 607.15(4), Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS

12-1	PT WEIDE, BASBRA 4141 S. ATLANTIC AVE. NEW SMYRNA BCH. FL
12-2	S BELLOTTI, DAVID 43 CEDAR DUNES DR. NEW SMYRNA BCH. FL
12-3	
12-4	
12-5	
12-6	
12-7	
12-8	
12-9	
12-10	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (If 12)

13-1		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13-2	<i>Delete</i>	
13-3	<i>President</i>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13-4		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13-5		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13-6		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13-7		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13-8		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13-9		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13-10		<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the board, certify that the information submitted with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(b), Florida Statutes. I further certify that the information deleted on my 1995 annual report or supplementary 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 who retained or retained an independent accountant to examine this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if a change of any kind occurred with an address.

SIGNATURE: *David Bellotti* 4/20/95 90128512
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR