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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT # M8

M84324

(6)

A & D BEVERAGE, INC.

FILED	
Mar 25 1998 8:00am	1
Secretary of State	

2/21/19x (813)372-902/2

AQU	DEVENAGE, INC.					
Principal Plac	e of Business	Mailing Address				<u> </u>
C/O ANIBAL	MERCADO	C/O AMBAL MERCADO)			
5839 SR 54 5839 SR 54				DO NOT HIDITE IN TH	UP PDACE	
NEW PORT RICHEY FL 34652 NEW PORT RICHEY FL 34652			DO NOT WRITE IN TH 3. Date Incorporated or Qualified	113 SPACE		
					06/02/1988	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0055845	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27			6. Certificate of Status Desired	Fee Required
City & Stat	8	City & State			6. Election Campaign Financing	\$5.00 May Be
23]	Country	28 Zip	Countr		Trust Fund Contribution	Added to Fees
24 24	25	29	├ ─,	у	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible
24]	9. Name and Address of Curre		30]		10. Name and Address of New Registers	
MF	RCADO, ANIBAL		81	Name		
	39 SR 54		-	01 - 1 4 4 4	(0.0 P. N1. 1. N.)	
	W PORT RICHEY FL 34652		82	Street Add	ress (P.O. Box Number is Not Acceptable)	
			83	1		
			84	City		lan Zio Cordo
			64	City	F	Zip Code
SIGNATURE		ND DIRECTORS	13.	eni signature requi	red when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
TITLE	D ALLON AND ALLON	☐ DELETE	1.1 TITLE			Change Addition
NAME	MERCADO, ANIBAL 5839 SR 54		1.2 NAME			
STREET ADDRESS	NEW PORT RICHEY FL			T ADDRESS		
CITY-ST-ZIP TITLE	S S	DELETE	1.4 CITY - 2.1 TITLE	S1-2IP		Change Addition
NAME	MERCADO, DANA	2 22	2.2 NAME			
STREET ADDRESS	5839 SR 54			T ADDRESS		
CITY-ST-ZIP	NEW PORT RICHEY FL		2. 4 CITY-	· ·		
TITLE		DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME	J		
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	<u> </u>	
TITLE		L DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			į.	T ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY-1	ST-ZIP		Change Addition
THLE		רי הנרנונ	5.1 TITLE	1		The Walley
NAME CTREET ANDRESS			5.2 NAME	F ADDRESS		
STREET ADDRESS CITY-ST-ZIP			5.4 CITY - 1	F ADDRESS		
TITLE		DELETE	6.1 TITLE	51- ZIF		Change Addition
NAME			6.2 NAME	1		
STREET ADDRESS				ADDRESS		
CITY-ST-ZIP			6.4 CITY-1			
14. I hereby o	ertify that the information supplied v	with this filing does not qualify f	or the exemp	tion stated in	Section 119.07(3)(i), Florida Statutes. I further	certify that the information
officer or of Block 12 of	on this arriual report of supplement director of the corporation or the rec or Block (13 if changed, or on an atta	continual report is true and act beiver or trustee empowered to achment with an address.	execute this	report as requ	re shall have the same legal effect as if made uired by Chapter 607, Florida Statutes; and the	at my name appears in