


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # M87880
 1. Entity Name
INTERNATIONAL BOTTLERS SUPPLY CORP.



Principal Place of Business 2540 W. 78TH STREET HIALEAH, FL 33016 US	Mailing Address 2540 W. 78TH STREET HIALEAH, FL 33016 US
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01112004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0059849	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
 SCHAFFER, FERENC J
 2540 W 78 STREET
 HIALEAH, FL 33016

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000151477
 05/04/04-80045-023 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV RASKOSKY, DAVID 2540 W 78 STREET HIALEAH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SCHAFFER, FERENC J. 8807 N.W. 149 TERRACE MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SCHAFFER, FERENC J 8807 NW 149 TERRACE MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ESPINOSA, YOLANDA 2540 W 78 STREET HIALEAH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *Ferenc J. Schafer* **Ferenc J. Schafer** **4-30-2004** **(305)558-7555**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #