

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

FILED
Apr 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P16610** (8)
1. Corporation Name
SUNTORY WATER GROUP, INC.



Principal Place of Business 2141 POWERS FERRY RD MARIETTA GA 30067 US	Mailing Address 2141 POWERS FERRY RD MARIETTA GA 30067 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/30/1987	
21		26		4. FEI Number 31-1156888	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
23		28			
Zip	Country	Zip	Country		
24	25	29	30		

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

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 607.0502 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE		1.1 TITLE	Treasurer & Secretary & Director	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HERSH, HARRY			1.2 NAME	Takashi Nishii		
STREET ADDRESS	2141 POWERS FERRY RD			1.3 STREET ADDRESS	12 East 49th St. 29th F		
CITY-ST-ZIP	MARIETTA GA			1.4 CITY-ST-ZIP	NY, NY 10017		
TITLE	VP	<input type="checkbox"/> DELETE		2.1 TITLE	Director	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	O'SHEA, DONALD			2.2 NAME	Yasuro Taniyama		
STREET ADDRESS	2141 POWERS FERRY RD			2.3 STREET ADDRESS	12 E 49th St. 29th F		
CITY-ST-ZIP	MARIETTA GA			2.4 CITY-ST-ZIP	NY, NY 10017		
TITLE	STD	<input checked="" type="checkbox"/> DELETE		3.1 TITLE	Director	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	FUKUYAMA, JASUHIRO			3.2 NAME	Hitofumi Oiwa		
STREET ADDRESS	1211 AVENUE OF AMERICANS			3.3 STREET ADDRESS	1-2-3, Motoakasaka		
CITY-ST-ZIP	NEW YORK NY			3.4 CITY-ST-ZIP	Minato-KU, TOKYO 107-8430, Japan		
TITLE	D	<input checked="" type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	TAMARI, TOSHIHIKO			4.2 NAME			
STREET ADDRESS	1211 AVENUE OF THE AMERICAS, 31ST FLOOR			4.3 STREET ADDRESS			
CITY-ST-ZIP	NEW YORK NY			4.4 CITY-ST-ZIP			
TITLE	D	<input checked="" type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	KOIKE, EIJI			5.2 NAME			
STREET ADDRESS	MORI BLD. NO. 31 5-7-2 KOJI-MACHI			5.3 STREET ADDRESS			
CITY-ST-ZIP	TOKYO JA			5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 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.

CR2E034 (10/97)