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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

1996 DIVISION OF CORPORATIONS								
1. Corporation	111460116	000022791	(6)					
GUA	RANA BEVERAGE CORPO	PRATION						
Principal Place	e of Business	Maling Address					DIEL DREAK DREAD ALDEA ELDEL	18818 (819) (119) (88)
2233 NW 79TH AVE Miami FL 33122 US		2233 NW 79TH AVE Miami FL 3312 US				3. Date Incorporated or Qualified	10- 0	
						03/24/1993	3a. Date of Last 05/01/	
· ·	ace of Business	2a. Mailing Address				4. FEI Number	1 00,0 1,	Applied For
Suite, Apt.	# otc	26				65-0402488		Not Applicable
22		Suite, Apt. #, etc.				5. Certificate of Status Desired		5 Additional Required
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution		00 May Be
Zip 24	Country	Zip	h 1	untry		8. This corporation has liability for i		199.032,
24]	9. Name and Address of Curre	[29] ent Registered Agent	30	T		Florida Statutes Yes		
		on registered Agent		81	Name	10. Name and Address of New R	egistered Agent	
EVAN:	S, LAWRENCE S ESQ			82				
	NW 79TH AVE					ddress (P.O. Box Number is Not Acceptable)		
MIAMI	FL 33122							
				84	City		Ia-T-	ip Code
44 D					•			
or register	to the provisions of Sections 607.050 ed agent, or both, in the State of Flo	02 and 607.1508, Florida Statu rida. Such change was authori.	tes, the abo zed by the i	ove-na	amed corpor tration's boar	ration submits this statement for the purp rd of directors. I horeby accept the appo	pose of changing its	registered office
tarnilar wit	1 4	ction 607.0505, Florida Stalute YKKYICE ≤ KV&⊓3				e a mostara. Prioretty doctopt the appe	rla la	a agent. i anii
	Signature, typed or printed name of regisfered age	nd az o tele if applicable. (N	OTE: Registered	Agent	Signature quire	d when reinstating)	A LAGINE	
12.	OFFICERS AI	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI		DRIS IN 12 S
NAME	FRANCISCO, RAUL SOUZ	☐ DELETE	1, 1 7				☐ Change	Addition
STREET ADDRESS	2222 ANA ZOTAL AME			1.2 NAME 1.3 STREET ADDRESS				[3
CITY-SI-ZIP	MIAMI FL		B B					រុំ
TITLE	VPD	□ DELETE	2 1 1	ITY-ST	- 2117	771/14	[] Change	FT Addition
NAME	DESTRI, PAOLO		2.2 N					Monthon
STREET ADDRESS	2233 NW 79TH AVE 23				DDRESS			ļ
CITY-ST-ZIP	MIAMI FL		2.4 CI	TY - ST	- ZIP			
THTLE	S EVANO LAMPENOE O	DELETE	3 1 7				Change	Addition
NAME CTOSET ADDOSCO	EVANS, LAWRENCE S 2233 NW 79TH AVE		3 2 N					
STREET ADDRESS CITY-ST-ZIP	MIAMI FL				ADDRESS			
TITLE	F	DELETE	3.4 Ct	TY-SI-	71P		F3 04	free Augus
NAME			4. 1 N				☐ Change	Addition
STREET ADDRESS			1		DORESS			
CITY-ST-ZIP				TY-\$1-				
TITLE		DELETE	5 1 1			· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition
NAME			5 2 N/4	AME				_
STREET ADDRESS			5 3 \$T	REET A	DDRESS			
CITY-ST-ZIP TITLE		F3 oriere		TY-ST-	ZIP			
NAME		DELETE	6 1 7				Change	☐ Addition
STREET ADDRESS			6 2 NA		poposes			
PITY OF 710			63S1	nce i Al	DDRESS			ĺ

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 1 SECRETARY

4/26/95 (305) 374-5505
Daysne Proce #