

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 28 AM 10:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000054380 (9)

1. Corporation Name

FIRST AMERICAN BEVERAGES, INC.

Principal Place of Business

1180 SPRING CENTRE SOUTH BLVD.
STE. 390
ALTAMONTE SPRINGS FL 32714
US

Mailing Address

1180 SPRING CENTRE SOUTH BLVD.
STE. 390
ALTAMONTE SPRINGS FL 32714
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/30/1993

3a. Date of Last Report
04/26/1994

4. FEI Number
59-3195146

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

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23

City & State

27

Zip

Country

24

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ASHE, PAUL R
1180 SPRING CENTRE SOUTH BLVD.
STE. 390
ALTAMONTE SPRINGS FL 32714

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)

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

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME EVANS, GORDON
STREET ADDRESS 1180 SPRING CENTRE SOUTH BLVD., STE. 390
CITY, ST, ZIP ALTAMONTE SPRINGS FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE VS
NAME DUCKROW, MIKE
STREET ADDRESS 1180 SPRING CENTRE SOUTH BLVD., STE. 390
CITY, ST, ZIP ALTAMONTE SPRINGS FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE C
NAME ASHE, PAUL R
STREET ADDRESS 1180 SPRING CENTRE SOUTH BLVD., STE. 390
CITY, ST, ZIP ALTAMONTE SPRINGS FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.07(6)(b), 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 treasurer or transfer agent empowered to execute this report as required by Chapter 197, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an addendum.

SIGNATURE:

Paul R. Ashe, Chairman
Paul R. Ashe, Chairman

4/24/95 407-865-6101