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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

P93000070824 (6)

BEVERAGE TECHNOLOGY INTERNATIONAL, INC.

Principal Place	of Business	Mailing Address	Mailing Address			s samisan sig insan siini neris nasit nästs esits santi neris neri salta tilitä tilitä dilitä tilitä			
2398 CHERRY BOCA RATON		2398 CHERRY PALM RD. BOCA RATON FL 33432							
						Date Incorporated or Qualified 10/04/1993	3a. Date 04	of Las	
2. Principal Pla	ice of Business	2a. Mailing Address			4. FEI Number Applied For			Applied For	
21		26			65-0445981			Not Applicable	
Suite, Apt. #	f, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		City & State				6. Election Campaign Financing	\$5.00 May Be		
23		28				Trust Fund Contribution	Added to Fees		
Zip	Country 25	Zιρ	——	Country		8. This corporation has liability for		x unde	rs 199.032,
24	9, Name and Address of Curre	29 and Ament	30	[30]		Florida Statutes Yes 10. Name and Address of New I	No tegistered Agent		
	5. Hallie and Faditos of Care	nt negistered Agent		81	Name	ID. Name Bito Address of New I	nogistered)	- Goin	
EVEC 10	MAN C								
FYFE, JC	PAIN 5 ERRY PALM RD.	82 Street Add			Street Addre	dress (P.O. Box Number is Not Acceptable)			
	ATON FL 33432			В3					
DOOK N	410N FE 35452								
				84	Crty		FL	85	Zip Code
or registere	o the provisions of Sections 607.050 ad agent, or both, in the State of Flor h, and accept the obligations of, Sec	ida. Such change was a	uthorized by the d	ve-n corpo	amed corporation's boar	ation submits this statement for the pud of directors. I hereby accept the app	impee of cha	nging i registe	ts registered office red agent. I am
SIGNATURE _	Signature, typed or printed name of registered agen	t and title if applicable	(NO1E: Registered	Agent	Lsignature required	t when reinstatrigi	DATE		
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS AND	DIREC	TORS IN 12
THILE	D DELETE		E 1.11	1. 1 TITLE			1] Chan	ge 🔲 Addition
NAME	fyfe, george g		1.2 M						
STREET ADDRESS	2398 CHERRY PALM RD.	1.3 \$		1.3 STREET ADDRESS					
CITY-ST-ZIP	BOCA RATON FL 33432			1.4 CITY - ST - ZIP					
TITLE	D			2 1 TITLE 22 NAME] Chan	ge 🔲 Addition
NAME	FYFE, JOAN S								
STREET ADDRESS	2398 CHERRY PALM RD.	23		2 3 STREET ADDRESS					
CITY - ST - ZIP	BOCA RATON FL 33432			2.4 CHTY - ST - 7IP					· · · · · · · · · · · · · · · · · · ·
THILE		DELET	☐ DELETE 3.1] Chan	ge 🔲 Addition
NAME			3.2 N						
STREET ADDRESS					ADDRESS				
C-TY-ST-7:P	☐ DELETE			3.4 CITY - ST - ZIF 4. 1 TITLE				7.00	
TITLE NAME			4.1 I				L] Chan	ge 🔲 Addition
					Innoces				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP TITLE				4.4 CITY - ST - ZIP 5 1 TITLE				7 Chan	ge 🔲 Addition
NAME		L. 5666	5.2 N				L.	J (101)	BA D MORROLL
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP									
TITLE	DELETE			6.4 City - St - ZiP] Chan	ge Addition
NAME			6.2 N				Ļ	J 1011	
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			6.4 CIT		ļ				
GILL WILLT			u.4 G	اد ب					

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 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 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 13.15 changed, or on an attachment with an address.

SIGNATURE:

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/96 (407) 395-9050