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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000070947 (5)

THE ORIGINAL PET DRINK COMPANY, INC.

FILED Mar 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								
ONE E BROWARD BLVD ONE E BROWARD BLVD								
1100 1100 1100 FORT LAUDERDALE FL 33301 FORT LAUDERDALE FL 33						DO NOT WRITE IN THIS SPACE		
FORT LAUDERDALE FL 33301 FORT LAUDERDALE FL 33				301		3. Date Incorporated or Qualified		
••		••				10/06/1993		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	A	pplied For
21 26						65-0443738		lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.								Additional
27						5. Certificate of Status Desired		Required
City & State City & State						6. Election Campaign Financing	\$5.00) May Be
23		28				Trust Fund Contribution		to Fees
Zip	Country	Zip		untry		8. This corporation owes or has paid the cu		'
24	25	29	30	,				I No
	9. Name and Address of Currer	nt Registered Agent	10. Name and Address of New Registered	Agent	· .			
RICHARD P. GREENE, P.A.					Name			
2455 E. SUNRISE BLVD. SUITE 905				82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
FORT LAUDERDALE FL 33304				83				
				84	City		85 Zip	Code
						<u> </u>		
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 age		OTE: Registere	d Ager	nt signature require	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	DIDECTO	DC IN 12
12.	OFFICERS AN	DELETE	1.1 (1	TI É		ADDITIONS/CHANGES TO OFFICERS AN	Change	Addition
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NAME	1 E BROWARD BLVD #1100				•000000			
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NAME			4. 2 N				•	
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NAME			5.2 N	ME				
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TITLE		DELETE	6.1 TI	_			Change	Addition
NAME			6.2 N					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				TY-ST	l l			

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.