						-11.					
FILE	NOW: FILING FEE	AF	TER MAY 1 I	S \$2	25.	00					
	PROFIT FLORIDA DEPARTA					TATE.					
CORPORATION Sandra B. Mc ANNUAL REPORT Secretary of											
(Central y of St											
19965-1-96 59806 CORPOR											
DOCUMENT # P93000071611 (6) 1. Corporation Name											
T. &	J. BEVERAGE CORP.						1 (4 R) (5 R) (4 4 (4 4 5) (1) (5 R)			A148 - 4188 - 1181 -	
Principal Place	of Business		Mailing Address								
1687 SW 81ST AVENUE 1687 SW 81ST AVENUE											
APT 102-C NORTH LAUDERDALE FL 39866 NO. LAUDERDALE FL 39866 NO. LAUDERDALE FL 39866											
US			US				3. Date Incorporated or Qualifie 10/11/1993	d 3a. Da	te of Last 05/01/		
2. Principal Pla	ace of Business		a. Mailing Address				4. FEI Number 65-0440441			Applied For	
Suite, Apt. 4	#. etc.	26	Suite, Apt. #, etc.			•	00-0440441			Not Applicabl	e
22		27	1				5. Certificate of Status Desired			Bequired	
City & State)	28	City & State				Election Campaign Financing Trust Fund Contribution	, 🗅		00 May Be	
Zip	Country		Zip	Cor	untry		This corporation has liability			led to Fees s 199.032,	-
				30]			Florida Statutes	Yes □ No			
	9, Name and Address of Curre	nt Hegi	stered Agent		81	Name	10. Name and Address of Ne	w Registere	d Agent		-
KONTOGIANNIS, ANTHONY 7060 NOVA DR											
					82	Street Add	Address (P.O. Box Number is Not Acceptable)				
APT 10					83						
DAVIE	FL 33317				84	City			85	Zip Code	\dashv
11. Pursuant t	o the provisions of Sections 607.050; ed agent, or both, in the State of Flor	2 and 6	07.1508, Florida Statute	s, the abo	l l	med corpo	ration submits this statement for the	purpose of c	hanoing its	registered office	e l
or register familiar wit	ed agent, or both, in the State of Flori h, and accept the obligations of, Sec	ida. Suc tion 607	ch change was authorize 7.0505, Florida Statutes	d by the	corpo	ration's boa	ard of directors. I hereby accept the a	ppointment a	as registere	ed agent. I am	
SIGNATURE _	WINDOWS BOOK CONTROL TO THE		an e en e				11 11 1 A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				.
12.	Signature, typed or printed name of rugsrered agon OFFICERS AN			E: Registerer	d Agent	signature require	ed when reinstating) ADDITIONS/CHANGES TO (DATE DEFICERS AN	ID DIBECT	ORS IN 12	 (S)
YITLE	D		DELETE	111	TITLE				Change		2E034 (12/95)
NAME	KONTOGIANNIS, ANTHON 7060 NOVA DR APT 102-0			1.2 N	IAME						8
STREET ADDRESS	DAVIE FL 33317	'				DDRESS					12
TITLE			[] DELETE	2 1 1	HTY-SI HTLE	- 7IP			Change	Addition	წ
NAME			-	2.2 N							
STREET ADDRESS				2.3 S	TREET A	DDRESS					
CITY-ST-ZIP TITLE			☐ DELETE		ITY-ST	- Z IP			[] Observe	TTI ASSES	
NAME				3 1 1 3.2 N					☐ Change	Addition	
STREET ADDRESS						ADDRESS					
CITY - S1 - ZIP				3.4 C	HY-ST	- 2 IP					
TITLE			DELETE	4. 1 1					☐ Change	Addition	
NAME STREET ADDRESS				4.2 N		PPDCCC				÷	
CITY-ST-ZIP					ITY-ST	iddress - Zip					
TITLE			☐ DELE1E	5.13			THE PARTY OF THE P		Change	Addition	
NAME				5.2 N							
STREET ADDRESS						DDRESS					
CITY-S1-ZIP TITLE			DELETE	5.4 C 6. 1 T	HTY-ST- TITLE	· ZIF			Change	Addition	
NAME				6.2 N							
STREET ADDRESS				6.3 S	TREET A	DORESS					
CITY-ST-ZiP	v certify that the information supplied	with this	e filing is voluntarily ferois		ITY-ST-	ziP not gualify:	for the execution stated in Coeffee t	10.07(0)(1).5	1- del- 0 5-4		_

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 if changed, or on an attachment with an address.

SIGNATURE

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