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Jan 24 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P94000089965 (5)

1. Corporation Name
NATURAL JUICE VENDORS, INC.



Principal Place of Business: 1951 DOBBS ROAD UNIT 14 ST AUGUSTINE FL 32086
Mailing Address: 1951 DOBBS ROAD UNIT 14 ST AUGUSTINE FL 32086-5141

3. Date Incorporated or Qualified: 12/12/1994
3a. Date of Last Report: 02/29/1996
4. FEI Number: 59-3294485
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, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent
OLSZEWSKI, RICHARD A
1951 DOBBS ROAD
UNIT 14
ST AUGUSTINE FL 32086

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: FL

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS
1.1 TITLE: D
1.2 NAME: OLSZEWSKI, RICHARD A
1.3 STREET ADDRESS: 52 CARRERA ST, APT 5
1.4 CITY-ST-ZIP: ST AUGUSTINE FL 32084

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE: D
1.2 NAME: OLSZEWSKI, RICHARD A
1.3 STREET ADDRESS: 370 FLORIDIAN AVENUE
1.4 CITY-ST-ZIP: ST. AUGUSTINE, FL 32084

14. I do 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.

SIGNATURE: Richard A. Olszewski
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date: Jan 15, 1997
Daytime Phone #: 904-825-0171

CR2E034 (9/96)