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Apr 21 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 # P95000025682 (2)

1. Corporation Name  
PENGUIN BEVERAGES, INC.



Principal Place of Business  
2233-2235 N.W. 78TH AVENUE  
MIAMI FL 33126

Mailing Address  
2233-2235 N.W. 78TH AVENUE  
MIAMI FL 33122-1618

3. Date Incorporated or Qualified 03/27/1995  
3a. Date of Last Report 05/01/1996

2. Principal Place of Business  
21 7959 NW 21st Street  
Suite, Apt. #, etc.

2a. Mailing Address  
26 7959 NW 21st Street  
Suite, Apt. #, etc.

4. FEI Number 65-0569566  
Applied For  
Not Applicable

22 City & State  
23 Miami, FL

27 City & State  
28 Miami, FL

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 33122

25 USA

29 33122

30 USA

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

EVANS, LAWRENCE S  
501 BRICKELL KEY DRIVE  
SUITE 300  
MIAMI FL 33131-2623

81 Name  
82 Evans, Lawrence S.  
83 Street Address (P.O. Box Number is Not Acceptable)  
701 Brickell Ave Suite 1900  
84 City  
Miami  
85 Zip Code  
FL 33131

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 type of or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS  
TITLE D  
NAME FRANCISCO, RICARDO  
STREET ADDRESS 5757 COLLINS AVE., UNIT 1001  
CITY-ST-ZIP MIAMI BEACH FL 33140  
TITLE S  
NAME EVANS, LAWRENCE S.  
STREET ADDRESS 501 BRICKELL KEY DR., #300  
CITY-ST-ZIP MIAMI FL 33131  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE  
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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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: *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/97

(305) 594 0476

Date

Daytime Phone #

CR2E034 (9/96)