PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

Change

☐ Addition

1996

DOCUMENT #

1. Corporation Name

11'LE

NAME

STREET ADDRESS.

SIGNATURE:

SIGNATURE AND T

CITY ST. 7IP

P95000043182 (1)

<b>BEVERAGE MAINTENANCE SYSTEMS</b>	. INC.	
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Principal Place of Business Mailing Address 6572 HARTLAND STREET 6572 HARTLAND STREET FORT MYERS FL 33912 FORT MYERS FL 33912 3. Date incorporated or Qualified 3a. Date of Last Report 06/02/1995 4. FE! Number 2. Principal Place of Business 2a. Mailing Address 2130 W. 12 Applied For 65.0586062 2180 W. 15 KT Not Applicable Suite. Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired # 218-D 218-D 22 Fee Required City & State City & State Election Campaign Financing \$5.00 May Be FT. Myor Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, 33901 102 29 3 24 25 Florida Statutes ☐ Yes ☑No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name MAYERR, GREGORY A **B2** Street Address (P.O. Box Number is Not Acceptable) 6572 HARTLAND STREET FORT MYERS FL 33912 **B3** City 85 Zip Code 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) Signature, typicd or prints o name of registered agent and title if apolicable CR2E034 (12/95) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TIFLE 1 1 TITLE ☐ Change ☐ Addition MAYER, SUSAN T Gregory A. Mayor NAME 12 NAME 6572 HARTLAND STREET STREET ADORESS 13 STREET ADDRESS FORT MYERS FL 33912 FT. Myls F1 35712 CHY-51-ZIF 14 City-St-ZiP TITLE □ DELETE 2 1 TITLE Change ☐ Addition NAME 22 NAME STREET ADDRESS 23 STREET ADDRESS CITY ST-ZIP 24 CITY-ST-ZIP TILLE DELETE 3 1 TITLE Change Addition NAME 3.2 NAME STELL ADDRESS 3.3 STREET ADDRESS 34 CITY-ST-ZIP DELETE THEF 4 1 TITLE Addition 42 NAME STHEET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP lifet DELETE 5.1 TITLE Change ☐ Addition NAME 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** CITY ST ZIP 5.4 C(TY-ST-Z)P

6. 1 TITLE

6.2 NAME

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 13 if changed, or on an attachment with an address.

GNING OFFICER OR DIRECTOR

63 STREET ADDRESS

6.4 CITY-ST-ZIP

DELETE