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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

May 15 1997 8:00am Secretary of State **ANNUAL REPORT** Secretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT # P95000064817 (6) BORN AGAIN BOTTLES, ETC. INC. Mailing Address Principal Place of Business 5214 SW 149TH PLACE MIAMI FL 5214 SW 149TH PLACE MIAMI FL 33185-4037 3. Date Incorporated or Qualified 3a. Date of Last Report 08/21/1995 05/01/1996

2. Principal Place of Business 2a. Mailing Address 4. FE! Number Applied For 65-0606692 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Žip Country Zip Country 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MCQUESTEN, SHANNON Name 5214 SW 149TH PLACE Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 83 84 City 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 Signature, typod or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6)TITLE DELETE 1.1 DITLE Change Addition MCQUESTEN, SHANNON 1.2 NAME NAME CR2E034 5214 SW 149TH PL STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33185 CITY-ST-ZIP 1.4 C(1Y - \$1 - Z)P DELETE Change Addition TITLE 2.1 TITLE MCQUESTEN, KURT NAME 2.2 NAME 5214 SW 149TH PL STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33185** CITY-ST-ZIP 2 4 OTY - ST - ZIP DELETE Change Addition TITLE 31 Tille SCHNEIDER, SANDRA NAME 3.2 NAME 2146 OVERSEAS HWY, LOT NO. 10 STREET ADDRESS 3.3 STREET ADDRESS **MARATHON FL 33050** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 C(1Y - ST - ZIP DELETE Change Addition TITLE 5.11018 NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change DELETE Addition TITLE 6.1 TRLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 eath; that I am an officer or director of the corporation or the receiver or trusted 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.

6.4 CITY - S1 - ZIP

CITY-ST-ZIP

11/20/00 10 10

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