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

PROFIT CORPORATION **ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthami

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000073805 (0)

ARP BEVERAGE, INC.

Principal Place of Business	Mailing Ado
7596 BEDHOLK OD	7536 00000

FILED May 13 1997 8:00am Secretary of State



7536 REPUBLIC ORLANDO FL 3					EPUBLIC DR DO FL 32819-8	3920										
							3. Date Incorporated or Qualified 09/22/1995			3a. Date of Last Report 06/22/1996						
 , ' • • • • • • • • • • • • • • • • • •		2a. Mailing Address					f	Numbe					Applied For			
21			2	26					5	9-3336	600				Not Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Ce	rtificate d	of Status Di	esired			Additional Required	
City & State				City & State						C [16	ation Ca	nanica Fu				
23			2	28						6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees						
Zip	Country			Zip Country				8. This corporation has liability for intangible tax under s. 199.032,								
24	-	25	2	29 30					Florida Statutes Yes No							
	e. Name	nd Address of C	urrent Re	gistere	d Agent	·						Address o				
VASC	concelos	, JOSE R					81	Name	CY .11	mPi	n :T	. ALG	NCAC	_.	R.,	
7862	? VILLXX DR ,						82	Street	Addres	ss (P.O.	Box Nur	nber is Not	Acceptab	ole)		
ORL	ANDO FL 3	2836										としひ				
*	(83									
_							84	City							85 Z	p Code
*								Di	SLA	NPO				<u>FL</u>	. 31	ZB19
office of fi	enistered and	ons of Sections 60 ant, or both, in the	State of Et	lorida S	Ruch chapne i	was autho	rized b	z the coi	A COUNDO	ianon a	ADELIII S III	is statemer eters. I her	nt for the p eby accer	urpose o of the apr	t changing pointment :	ji its registered as registered
agent I a	m familiar wit	n and accept the	obligation:	s of, So	ction 607.Ŏ50	5, Florida	Statute	S.	,							J
SIGNATURE	Standard America	or printed name of register				(NOTE Rea	olema An			Luka sala	4			DATE		
12.	Significate, typesic		S AND DIF				13,	en signacu	e required			CHANGES	TO OFFIC		DIRECT	ORS IN 12
TITLE	DP				DELETE		1.1 TITLE		12				•		Chang	
NAME	JUNIOR, O	DLIMPIO J					1.2 NAME		1 -	~	TEL	. 4 . 4	UENC	40		
STREET ADDRESS		IBERLEY CIR					1.3 STREET	ADDRESS	75	36	RES	UBLIC	200	ខិប្រិច		
CITY-ST-ZIP	ORLANDO	FL 32836				1	14 0·1Y-8	31 - ZIP		$2L\Delta \kappa$		FL	32	819		
TITLE	DT 🔪				DELETI	E	21 HILE								Chang	e 🔲 Addition
NAME	DE'CARD	PAULO C					22 NAME									
STREET ADDRESS	5938 SHO	RE BREEZE LN				1	2.3 STREE	ADDRESS								Ï
CITY-ST-ZIP		FL 32810					2. 4 CHY-	\$1 - ZIP								
TITLE	DS ,				DELETE	E	3.1 TITLE								Chang	e 🔲 Addition
NAME		ZLOS, JOSE R					3.2 NAME									
STREET ADDRESS	7862 VILL	A DR				I.	3.3 STREET	ADDRESS								į
CITY-ST-ZIP	ORLANDO	FL 32836					3.4. CITY-	S1 - ZIP								
TITLE					☐ DEFEI		4.1 TO LE								L Chang	e L_I Addition
NAME							4. 2 NAME									
STREET ADDRESS	ì					- 1	4.3 STREET	ADDRESS	1						•	
CiTY-ST-ZIP					T DELEVE		4.4 CITY - :	51- <i>2</i> (P	ļ						T 01	T 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
TITLE					☐ DELETI		5.1 TITLE								Chang	e Addition
NAME						1	5.2 NAME									
STREET ADDRESS								ADDRESS	1							
CITY-ST-ZIP TITLE					DELETI		5.4 CITY - 9 6.1 TITLE	31 - ZIP							Chang	e Addition
					OLLEN		6.2 NAME								L Onang	. D. VOOIIIOII
NAME expect appress								ADDOLOG								
STREET ADDRESS						1		ADDRESS	1							
CITY-ST-ZIP 14. I do heret	by certify that	the information su	pplied with	h this fi	ling does not		64 Dity :		stated i	in Soctio	n 119.07	(3)(i), Flori	da Statule	s. I furthe	r certify th	at 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.

RAILIE BLOUIS

culular (400) 363-0721