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

**PROFIT** CORPORATION ANNUAL REPORT

1997

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

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23

24



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000049294 (7)

Country

9. Name and Address of Current Registered Agent

25

SANTIMAW, ROBERT H 6314 CORPORATE CT, SUITE C

FT MYERS FL 33919

DKW BEVERAGE SALES, INC.

Principal Place of Business	Mailing Address	
6314 CORPORATE CT. SUITE C FT MYERS FL 33919	6314 CORPORATE CT. SUITE C FT MYERS FL 33919-3516	

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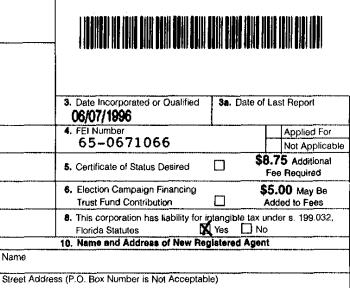
2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

## **FILED** Apr 16 1997 8:00am Secretary of State



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.

Country

81

В3 84 Name

City

30

SIGNATURE	Signature typed or pented name of registered agent and title diapplicab	le (NOTE: FI	egistered Agent signature rec	<u> </u>		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AN	DIRECTOR	S IN 12
Tale	D	DELETE	1.1 TITLE		Change	Addition
NAME	DEWEY, SCOTT P		1.2 NAME			
STREET ADDRESS	6314 CORPORATE CT, SUITE C		1.3 STREET ADDRESS			
CITY-ST-ZIF	FT MYERS FL 33919		1.4 CITY - ST - ZIP			
TITLE	D	DELETE	2.1 TITLE		Change	Addition
NAME	KIBBEY, MARC H		2.2 NAME			
STREET ADORESS	6314 CORPORATE CT, SUITE C		2.3 STREET ADDRESS			
0/14 - \$7 - 2/P	FT MYERS FL 33919		2. 4 CITY-ST-ZIP			
3011	0	DELETE	3.1 TITLE		Change	Addition
NAME	SANTIMAW, ROBERT H		3.2 NAME			
STREET ADDRESS:	6314 CORPORATE CT, SUITE C		3.3 STREFT ADDRESS			
CHY-ST-ZIP	FT MYERS FL 33919		3.4. CITY-ST-ZIP			
TITLE		☐ DEFELE	4.1 TiTLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CCTY-S1-7IP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE		☐ Change	Addition
NAMe			5.2 NAME			
STREET ADORESS			5.3 STREET ADDRESS			
CITY - S1 - ZIP			5.4 CITY - ST - ZIP			
THILE		DELETE	6.1 TITLE		Change	Addition
NAME			62 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY - ST - 7IP	by certify that the information supplied with this filing		64 CITY+ST-ZIP			

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 pairiess.

ROBERT H. SANTIMAW

941-432-0088

Zip Code

Daytime Phone #