

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 04, 1999 8:00 am  
Secretary of State

05-04-1999 90139 014 \*\*\*158.75

DOCUMENT # P96000104508

1. Corporation Name

CRYSTAL MOUNTAIN SPRINGS WATER COMPANY

Principal Place of Business

4890 SW 75 AVE.  
MIAMI FL 33155

Mailing Address

4890 SW 75 AVE.  
MIAMI FL 33155

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/31/1996

4. FEI Number

65-0157916

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing



\$5.00 May Be  
Added to Fees

8. This corporation owes the current year intangible  
Personal Property Tax.

☐ Yes ☐ No

2. Principal Place of Business

21 8873 SW 131 St

Suite, Apt. #, etc.

22

City & State

23 Miami Florida

Zip

24 33176

Country

25 USA

2a. Mailing Address

26 8873 SW 131 St

Suite, Apt. #, etc.

27

City & State

28 Miami Florida

Zip

29 33176

Country

30 USA

9. Name and Address of Current Registered Agent

CARBONELL, JAVIER  
7777 SW 74 ST.  
MIAMI FL 33143

10. Name and Address of New Registered Agent

81 Name

Claudia M. Carbonell

82 Street Address (P.O. Box Number is Not Acceptable)

7777 SW 74 St

83

84 City

Miami Florida

FL

85 Zip Code

33143

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/27/99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME CARBONELL, JAVIER  
STREET ADDRESS 7777 SW 74 ST.  
CITY-ST-ZIP MIAMI FL 33143

TITLE ☐ DELETE

NAME VP CARBONELL, CLAUDIA  
STREET ADDRESS 7777 SW 74 ST.  
CITY-ST-ZIP MIAMI FL 33143

TITLE ☐ DELETE

NAME VP Fernando Vivar  
STREET ADDRESS 458 SW 19 Rd  
CITY-ST-ZIP Miami FL 33129

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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, with all other like empowered.

SIGNATURE:

Claudia M. Carbonell

4/12/99

Date

(305) 262-7070

Daytime Phone #

CR2E034 (11/98)

0225718