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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000071818 (3)

MILLENNIUM BEVERAGE COMPANY

FILED Apr 16 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address								n remander and serve seder derst eerle eeste verte rever stade 1850 1850 (1901 1811 1864	
442 W. KENNEDY BLVD. SUITE 200 TAMPA FL 33606				442 W. KENNEDY BLVD. SUITE 200 TAMPA FL 33606				DO NOT WRITE IN THIS SPACE	
1								3. Date incorporated or Qualified	
								08/18/1997	
2. Principal Place of Business				2a. Mailing Address				4, FEI Number Applied For	
21				28				59-346 9082 Not Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired See Regulred Fee Regulred	
City & State				City & State				Election Campaign Financing \$5.00 May Be	
23				28				Trust Fund Contribution Added to Fees	
Zip Country			1	Zip Country			/	8. This corporation owes or has paid the current year Intangible	
24 25			2:	9]	30			Personal Property Tax due June 30. Yes No	
	g, Name	and Address of (Current Reg	gistered Agent		10. Name and Address of New Registered Agent			
l WA	LKER, TOD	D				61 Name			
442 W. KENNEDY BLVD.				82 Sti		Street Add	dress (P.O. Box Number is Not Acceptable)		
SUITE 200 TAMPA FL 33606						83			
, ,,,,	/ (E 000	,,,,,				84	City	85 Zip Code	
							1 1	FL 	
11. Pursuant office or reagent. La	to the provisi- egistered ago m familiar wit	ons of Sections 60 ent, or both, in the th, and accept the	7.0502 and State of Fig obligations	1607.1508, Florida orida. Such change of Section 607.05	Statutes, the al was authorize 05. Florida Stat	bove d by	e-named co y the corpora	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered	
SIGNATURE			oonganon.	51, 00011011 001 .051	oo, rionda ola	i GiO	o.		
ļ. <u>.</u>	Signature, typed	or printed name of registe				d Age	ent signature requ	uired when reinstating) DATE	
TITLE		OFFICER	S AND DIR		13.		r··	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
i - I	D	7000 F		☐ DELET				Change Addition	
NAME .		, TODD F			1.2 N/			r .	
STREET ADDRESS		ALE STREET					ADDRESS	·	
CITY-ST-ZIP TITLE	TAMPA F	L 33009		☐ DELET			IT-ZIP	C Obacca C Addition	
NAME								☐ Change ☐ Addition	
STREET ADDRESS					2.2 N				
l .							ADDRESS		
CITY-SI-ZIP TITLE				DELET			ST-ZIP	D Observe D Addition	
NAME					3.1 III			Change Addition	
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP								j	
TITLE				☐ DELET			ST-ZIP	Change Addition	
NAME					4.2 N			Change C Audition	
STREET ADORESS							ADDRESS		
CITY-ST-ZIP					4.4 Cr			İ	
TITLE				DELET			- Lil	☐ Change ☐ Addition	
NAME					5.2 NA		İ	T com do T Manuals	
STREET ADDRESS							ADDRESS		
CITY-SI-ZIP					5.4 CI				
TITLE		,, , ,		☐ DELET			1-411	Change Addition	
NAME					6.2 NA		1	Onungo Mudition	
STREET ADDRESS					B		ADDRESS		
CITY-ST-ZIP					64 CI				

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 or an attachment with an address.