


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # P99000035118 1. Entity Name BEVERAGE CONTROL SYSTEMS INC.	
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Principal Place of Business 4832 MYRTLE BAY DRIVE ORLANDO, FL 32829	Mailing Address 4832 MYRTLE BAY DRIVE ORLANDO, FL 32829
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04132004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3576088	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

TOMLINSON, JACK 4832 MYRTLE BAY DRIVE ORLANDO, FL 32829
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**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE <u><i>Jack A. Soml</i></u>	DATE <u>4-13-2004</u>
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P TOMLINSON, JACK 4832 MYRTLE BAY DR. ORLANDO, FL 32829
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04/20/04-80026-002 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: <u><i>Jack A. Soml</i></u>	DATE <u>4-13-2004</u>	Daytime Phone # <u>407-273-2480</u>
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