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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S08401

(9)

CONTIN	NENTAL WATER COMPANY	· · · · · · · · · · · · · · · · · · ·			
Principal Place	e of Business	Mailing Address		~ -	/
1998 N.E. 150 STREET NORTH MIAMI FL 33181-1116		1998 N.E. 150 STREET NORTH MIAMI FL 33181-1116		DO NOT WRITE IN THIS SPACE.	
				3. Date Incorporated or Qualified	
				10/23/1990	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0227339	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
I − Citγ & State		City & State		Election Campaign Financing	\$5.00 May Be
23		28	1	Trust Fund Contribution	Added to Fees
Zip	Country	Zip 11	Country	8. This corporation owes or has paid the	
24	25 9. Name and Address of Curren	129	30	Personal Property Tax due June 30. 10. Name and Address of New Registere	Yes No
KRI	SS, RONALD A.	r riogistered Agont	81 Name	IV. Hame and Address of New Tregister	eo Agent
SUITE 3400 ONE BISCAYNE TOWE 2 SOUTH BISCAYNE BLVD.		R	82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
	MI FL 33131		83		
			84 City	<u> </u>	85 Zip Code
11. Pursuant office or ragent. La	to the provisions of Sections 607.0505 egistered agent, or both, in the State in familiar with, and accept the obliga	2 and 607,1508, Florida Statut of Florida Such change was a dions of, Section 607,0505, Fit	es, the above-named corp authorized by the corporat brida Statutes.	poration submits this statement for the purposition's board of directors. I hereby accept the a	
SIGIVATORE	Signature. Typed or product name of registered ages	of and bite diapplicable (NO)	F Registered Agent signature requir	ed when reinstating) DAT	É
12.	OFFICERS AND	and the second of the second o	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	☐ DELETE	1,1 TITLE		☐ Change ☐ Addition
NAME	JACKSON, EDWIN SMITH JR.		1.2 NAME		
STREET ADDRESS	1998 NE 150 STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	NORTH MIAMI FL		1.4 CITY - ST - ZIP		
TITLE 1	D	DELETE	2.1 TITLE		L Change Addition
NAME	RODGERS, THOMAS M. JR.		2.2 NAME		
STREET ADDRESS	1998 NE 150 STREET		2.3 STREET ADDRESS		
CITY-ST-ZIP	NORTH MIAMI FL	DELETE	2. 4 CITY - ST - ZIP		Change Addition
TITLE			3.1 TOLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. CITY - \$1 - 7IP		☐ Change ☐ Addition
TITLE		בן טונו ונ	4.1 TITLE		
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
ļ					onsinge notified
NAME ATTEX ADDRESS			5.2 NAME	•	
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DILETE	5.4 CITY-S1-ZIP 6.1 TITLE		Change Addition
TITLE		<u> </u>	6.2 NAME		change notified
NAME .					
STREET ADDRESS			6.3 STREET ADDRESS		

14. Thereby 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.

FILED

Apr 21 1998 8:00am

Secretary of State