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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # \$3924

(2)

SAN BENEDETTO MINERAL WATERS OF AMERICA, INC.

Principal Plac	e of Business	Ma	ailing Address			·		, 12011214 185 (1114 15114 11911 A182	, 1101 BIBLI 2 12	*** ****** ***** ****	II BIEIT IMBY
420 S DIXIE HWY 3RD FL C/O MARK R ANTONELLI. ESO CORAL GABLES FL 33146		Ç	420 S DIXIE HWY 3RD FL C/O MARK R ANTONELLI, ESO CORAL GABLES FL 33146					DO NOT WRI	TE IN THIS	SPACE	
COUNT OND	10 7 1 33140		WHAL ORDERS IE 33	140			3	. Date Incorporated or Qualifie		- OF ACE	
							1	03/15/1991	,		
2. Principal P	lace of Business	28.	Mailing Address			· · · · · · · · · · · · · · · · · · ·	4.	. FEI Number		Ar	oplied For
21		26	-					59-3060818		— — — — — — — — — — — — — — — — — — —	ot Applicable
Suite, Apt	#, elc.	1=1	Suite, Apt. #, etc.				1		NCA	\$8.75	
22		27					Б.	. Certificate of Status Desired	X		equired
City & Stat	0		City & State				6.	. Election Campaign Financing		\$5.00	May Be
23		28	·					Trust Fund Contribution		Added 1	to Fees
Zip	Couritry	ļ,	Zip		ountry	•	8.	. This corporation owes or has			
24	25	29		30	,		1	Personal Property Tax due Ju			No
	9, Name and Address of Curre	in negis	rei an Waur		81	Name	10.	Name and Address of New	1egistered	Agent	
	ITONELLI, MARK R, ESQ				"		-	NELLI MARK	R. 1	Esa	
420 \$ DIXIE HWY 3RD FL					82 Street Address (P.O. Box Number is Not Acceptable)				able)		
	ORAL GABLES FL 33146				83	420	حے	DIXIE HWY	12'S	fl.	
					53			•	•	•	
					84	City	^ /	100156		85 Zip (Code
11 Pursuant	to the provisions of Sections 607.05	02 and 60	07 1509 Florida State	tor the	about	CORI	oratio	. GABLES	FL		3146
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with and accept the oblig	e of Floric	la Such change was	authoriz	ed by	the corporation	on's	board of directors. I hereby acc	ept the ap	pointment as	registered
ı	m familiar with and accept the oblic	jations of	, Section 607.0505, F	lorida St	atutes	3.			donte	o 2	
SIGNATURE	Signature, typod or printind name of registered as	A Sh	A applicable (NC	VIE Basista	rnd Agn	int signature require		on unicotational	7 8 1/ 9	0	
12.	OFFICERS AN			13		int signature require		ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECTOR	3S IN 12
TITLE	PST		DELETE		TITLE			1.00		☐ Change	Addition
NAME	graunstadt, earl			1.2	NAME						
STREET ADDRESS	6 RHEINENBERGER ST			1.3	STREET	ADDRESS					
CITY-ST-ZIP	LIECHTENSTEIN				CITY-S	- 1					
TITLE	D		☐ DELETE	21	TITLE					Change	☐ Addition
NAME	graunstadt, earl			22	NAME						
STREET ADDRESS	VADUZ, 9490 LIECHTENSTE	1		23	STREET	ADDRESS					
CITY-ST-ZIP	LIECHTENSTEIN			2.4	CITY-S	ST-ZIP					
TITLE			DELETE	3.1	TITLE					Change	☐ Addition
NAME				3.2	NAME	1					
STREET ADDRESS				3.3	STREET	AODRESS					
CITY+ST-ZIP				3.4.	CITY-S	31 - ZIP					
TITLE			DELETE	4.1	TITLE					Change	Addition
NAME				4. 2	NAME						
STREET ADDRESS				4.3	STREET	ADDRESS				•	
CITY-ST-ZIP				4.4	CITY-S	T-ZIP					
TITLE			☐ DELETE	5.1	TITLE					Change	☐ Addition
NAME				5.2	NAME						
STREET ADDRESS				5.3	STREET	ADDRESS					
CITY-ST-ZIP				5.4	CITY - ST	T- ZIP			·		
TITLE			☐ DELETE	6.1	TITLE	"				Change	Addition
RAME				6.2	NAME						
STREET ADDRESS				6.3	STREET	ADDRESS					

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 eccurate 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.

SIGNATURE:

and Francisco

16 april 1998

011-39-6-33266794

FILED

May 05 1998 8:00am

Secretary of State

CR2E034 (10/97