

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Feb 11, 2013
Secretary of State
CC9157047519

Entity Name: SOUTHERN BEVERAGES GROUP LLC

Current Principal Place of Business:

LYFORD MANOR, LYFORD CAY, WEST BAY STREET
NASSAU
BAHAMAS, XX XXXXX

Current Mailing Address:

LYFORD MANOR, LYFORD CAY, WEST BAY STREET
NASSAU
BAHAMAS, XX XXXXX XX

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name RODRIGUEZ, ELIGIO
Address NICANOR A. DE OBARRIO AV,50TH ST, 26TH FL
City-State-Zip: PANAMA, REPUBLIC OF PANAMA

Title MGRM
Name EDSHIRE INC.
Address LYFORD MANOR, LYFORD CAY, WEST BAY STREET
City-State-Zip: NASSAU, BAHAMAS XX XXXXX

Title MGRM
Name FARMSTEAD LIMITED
Address LYFORD MANOR, LYFORD CAY, WEST BAY STREET
City-State-Zip: NASSAU, BAHAMAS XX XXXXX

Title MGRM
Name LEEFIELD HOLDINGS INC
Address LYFORD MANOR, LYFORD CAY, WEST BAY STREET
City-State-Zip: NASSAU, BAHAMAS XX XXXXX

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DINA FECCI

AUTHORIZED PERSON

02/11/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date