2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L9800000678 LA TROPICAL BREWING COMPANY, LLC						FILED			
						OIFEB12 AF	111:1.1.		
Principal Plac	e of Business	Mailing Address	Mailing Address						
117 MAJORCA AVE. FIRST FLOOR EAST CORAL GABLES FL 33134		117 MAJORCA AVE. FIRST FLOOR EAST CORAL GABLES FL 33134			SECRETARY OF STATE TACEAHASSES, FLORIDA				
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			, DO NOT WRITE IN THIS SPACE				
City & State		City & State			4. FEI Number 65-0838502 Applied For Not Applicable]
Zip Country		Zip	ry	5. Certi	ficate of Status Desired	\$5.00 Ad Fee Require			
	6. Name and Address of Current	Registered Agent	~ .		· 7. Name	e and Address of New Registere			1
				Name					
	DRPORATE SERVICES, INC. TH BISCAYNE BOULEVARD, SUITE	3000				P.O. Box Number is Not Acceptable)			
MIAMI FL							Zip Cod	e	
8 The above	named entity submits this statement fo	r the purpose of changing its i	registere	d office or registe	red agent	_			-
SIGNATURE .	Signature, typed or printed name of registered agent of the control of the contro		W!!! F	FEE IS \$50.00 Department		9000374 -02/20/01- *****50.0	410 9	5 -028 -50.00	
9.	MANAGING MEMBE	I ERS/MEMBERS	10.			ADDITIONS/CHANG	ES .		<u> </u>
TITLE NAME - STREET ADDRESS CITY-ST-ZIP	MGRM PORTUONDO, MANUEL J 117 MAJORCA AVE., FIRST FLOO CORAL GABLES FL 33134	Delete	1				☐ Change	☐ Addition	R2E083 (11/00)
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete]			☐ Change	☐ Addition	CBS
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TITLE NA STREET ADDRESS CITY-ST-ZIP		☐ Delete				W	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	•	□ Delete		!	·		Change	Addition	
indicated	certify that the information supplied with on this report is true and accurate and bility company or the receiver or trustee	that my signature shall have th	he same	legal effect as if r	nade under	oath; that I am a managing mem			

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENT

2-6-01

(305) 444-445