2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005319

FILED Jan 22, 2007 Secretary of State

Entity Name: MIAMI AREA SOCIETY OF HOMEBREWERS, INC.

Current Principal Place of Business: New Principal Place of Business: 6200 SW 37 STREET MIAMI, FL 33155 **Current Mailing Address: New Mailing Address:** 6200 SW 37 STREET MIAMI, FL 33155 US FEI Number: 65-0719341 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RUBIN, NANCY 2345 SW 28 STREET MIAMI, FL 33133 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete HICKEY, DARRYL Name: Name: 6200 SW 37 STREET Address: Address: City-St-Zip: SOUTH MIAMI, FL 33155 US City-St-Zip: Title: SD Title: TD (X) Change () Addition () Delete BEARD, ROBERT Name: BEARD, ROBERT Name: Address: 6250 SW 16 TER Address: 6250 SW 16 TER City-St-Zip: MIAMI, FL 33155 US City-St-Zip: MIAMI, FL 33155 US Title: () Delete Title: SLD (X) Change () Addition BRANSFORD, MARK KELLEY, MARK Name: Name: 13120 SW 92 AVE, SUITE D-208 Address: Address: 16380 SW 278TH ST. City-St-Zip: MIAMI, FL 33175 US City-St-Zip: HOMESTEAD, FL 33131 US Title: TD (X) Delete Title: () Change () Addition Name: KELLEY, MARK Name: 16380 SW 278TH ST. Address: Address: City-St-Zip: HOMESTEAD, FL 33031 US City-St-Zip: Title: VPD () Delete Title: VD (X) Change () Addition EVERETT, RUSSELL EVERETT, RUSSELL Name: Name: 159 SW 28 ROAD 159 SW 28 ROAD Address: Address: City-St-Zip: MIAMI, FL 33129 City-St-Zip: MIAMI, FL 33129

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DARRYL HICKEY PD 01/22/2007