PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT # 845752



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90047 031 ***150.00

THE STROH BREW	ERY COMPANY								
Principal Place of Business		Mailing Address				- L 100101 10111 BITOT BIFIL (088/ 8)	11 2 121 319 11 4 1	Wes #3#15 #1#(1) (liāli atāti jasi
100 RIVER PLACE DETROIT MI 48207-291 US		100 RIVER PLACE TAX DEPARTMENT DETROIT MI 48207-291			DO NOT WRI	TE IN THIS	SPACE		
		US				3. Date Incorporated or Qualifed 04/16/1980			ļ
Principal Place of Busines		2a. Mailing Address				4. FEI Number		Ar	plied For
21 - Principal Place of Busines	5	26		-		38-1078840			ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		•	Additional aquired
City & State		City & State				6. Election Campaign Financing		\$5.00	May Be
23	ļ	28				Trust Fund Contribution			to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation owes the curr	ent year Int	angible	
24 25	- · · · · ·	29	30			Personal Property Tax.	·	Yes	□No
	d Address of Current R	egistered Agent				10. Name and Address of New I	Registered .	Agent	
OT 6000001***	NEOVOTEN			81	Name				
CT CORPORATION				82	Street Addres	ss (P.O. Box Number is Not Accept	able)		_
1200 S. PINE ISLA									
PLANTATION FL 3	33324		Ì	83					
•			ŀ	84	City	_		85 Zip	Code
· · ·				- '			FL	<u> </u>	
11 Pursuant to the provision	s of Sections 607 0502 a	nd 607 1508 Florida Sta	tutes, the ab	bove-r	amed corpor	ration submits this statement for the	purpose of	changing its	registered
office or registered agent agent. I am familiar with,	is of Sections 607.0502 a t, or both, in the State of f and accept the obligation	Florida. Such change was	s autnonzed	i by th	named corpore e corporation	ration submits this statement for the n's board of directors. I hereby acce	pt trie appoi	changing its ntment as re	registered egistered
office or registered agent agent. I am familiar with,	t, or both, in the State of I and accept the obligation	Florida. Such change was ns of, Section 607.0505, F ad title if applicable. (NC	s authorized Florida Statu OTE: Registered	i by the	named corpore corporation	when reinstating)	DATE	innein as re	
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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 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, with all other like empowered.

SIGNATURE: X

REQUIRED.

4/5/99

313-446-2120