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Feb 27 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 857863

(5)

1. Corporation Name

PABST BREWING COMPANY

Principal Place of Business

7600 NE 41ST ST.
STE 300
VANCOUVER WA 98662
US

Mailing Address

PO BOX 4556
VANCOUVER WA 98662-0556
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

25 CLARK

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

30 CLARK

3. Date Incorporated or Qualified

09/23/1983

3a. Date of Last Report

04/03/1996

4. FEI Number

39-0983896

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of officer or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE CPD ☐ DELETE

NAME ISSLEIB, LUTZ
STREET ADDRESS RT. 1 BOX 150
CITY-ST-ZIP HUNT TX

TITLE VSD ☐ DELETE

NAME ORSI, BERNARD A.
STREET ADDRESS 74 ST. THOMAS WAY
CITY-ST-ZIP TIBURON CA

TITLE VD ☐ DELETE

NAME DAMVELD, GARY
STREET ADDRESS 190 EDGEWOOD
CITY-ST-ZIP MILL VALLEY CA

TITLE V ☒ DELETE

NAME SCHIESS, JOHN M.
STREET ADDRESS 23901 NE 139TH ST.
CITY-ST-ZIP BRUSH PRAIRIE WA

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

78024

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

94920

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

VD

DAMVELD, GARY
1000 GREEN STREET #205
SAN FRANCISCO, CA 94133

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE:

Signature and typed or printed name of signing officer or director

2-10-97

(360) 260-9500

Date

Daytime Phone #

CR2E034 (9/96)