

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F94000000513 (1)
1. Corporation Name PETE'S BREWING COMPANY

Phone for Place of Business	Mailing Address
514 HIGH STREET PALO ALTO, CA 94301	514 HIGH STREET PALO ALTO, CA 94301

2. Principal Place of Business		2a. Mailing Address	
21		26	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	
City & State		City & State	
23		28	
Zip	Country	Zip	Country
24	25	29	30
9. Name and Address of Current Registered Agent			

3. Date of registration: 02/02/1994

4. Filing Number: 77-0110743

5. Date of last filing: 02/02/1994

6. Due Date of Payment of Taxes: 02/02/1994

7. Date of expiration of the term of the registration: 02/02/1994

8. Date of expiration of the term of the registration: 02/02/1994

9. Date of expiration of the term of the registration: 02/02/1994

10. Name and Address of New Registrant: 77-0110743

PRENTICE-HALL CORPORATION SYSTEM, INC.
SUITE 105
1201 HAYES STREET
TALLAHASSEE, FL 32301

81 Name _____
82 Street Address (H.O. Box Number and Zip Code) _____
83 _____
84 City _____

11. Pursuant to the provisions of Sections 607.0502 and 607.1502, Florida Statute, the above named corporation is hereby changed to a corporation of the State of Florida. Such change was authorized by the corporation's board of directors. The new agent is a person who is familiar with, and accepts the obligations of, Section 607.0501, Florida Statute.

SACRAMENTO

$\epsilon_1 = 0$ corresponds to the periodic solution of the homogeneous equation (10).

$$E_{\text{eff}} = E_0 \left(1 - \frac{1}{2} \frac{v_{\text{eff}}}{v_0} \right) \quad (1)$$

12	OFFICERS AND DIRECTORS	☐ DELETED
NAME	PRESIDENT	
NAME	BOZZINI, MARK	
SUBJECT ADDRESS	10 ARBOL GRANDE COURT	
CITY, ST, ZIP	MENLO PARK, CA 94025	☐ DELETED
NAME	CFO/SEC.	
NAME	COLLINS, JAMES E.	
SUBJECT ADDRESS	340 STEVICK DRIVE	
CITY, ST, ZIP	ATHERTON, CA 94027	☐ DELETED
NAME		
SUBJECT ADDRESS		
CITY, ST, ZIP		☐ DELETED
NAME		
SUBJECT ADDRESS		
CITY, ST, ZIP		☐ DELETED
NAME		
SUBJECT ADDRESS		
CITY, ST, ZIP		☐ DELETED
NAME		
SUBJECT ADDRESS		
CITY, ST, ZIP		☐ DELETED

[illegible]

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-04/04/96--01013--011
***200.00

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES E. COLLINS

3-14-96

(800) 788-0212

96-3-96