

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000091063

FILED  
Mar 28, 2009  
Secretary of State

Entity Name: BREWPUB ASSOCIATES, LLC.

**Current Principal Place of Business:**

C/O ALEXANDER POSTELNEK  
700 SOUTH OCEAN BLVD. SUITE 301  
BOCA RATON, FL 33432

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ALEXANDER POSTELNAK  
P.O. BOX 1844  
BOCA RATON, FL 33429

**New Mailing Address:**

FEI Number: 75-3223346

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

POSTELNEK, MARC  
700 SOUTH OCEAN BLVD., SUITE 301  
BOCA RATON, FL 33432 US

**Name and Address of New Registered Agent:**

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: POSTELNEK, ALEXANDER  
Address: PO BOX 1844  
City-St-Zip: BOCA RATON, FL 33429

Title: MGR ( ) Delete  
Name: POSTELNEK, MARC  
Address: P.O. BOX 1844  
City-St-Zip: BOCA RATON, FL 33429

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARC POSTELNEK

MGR

03/28/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date