

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
Jan 29 1997 8:00am  
Secretary of State

DOCUMENT # L93022

(6)

1. Corporation Name  
GOLDEN-BREW, INC.

Principal Place of Business

12399 SW 53RD ST  
STE 104  
COOPER CITY FL 33330  
US

Mailing Address

P. O. BOX 821610  
S. FLORIDA FL 33082-1610  
US



3. Date Incorporated or Qualified

08/14/1990

3a. Date of Last Report

04/30/1996

4. FEI Number

65-0214602

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CHIDO, DANIEL J  
2652 EDGEWATER DR  
FT LAUDERDALE FL 33332

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, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE

NAME CHIDO, DANIEL J.  
STREET ADDRESS 2652 EDGEWATER DR  
CITY- ST- ZIP FT LAUDERDALE FL

1.1 TITLE ☐ Change ☐ Addition

TITLE VD ☐ DELETE

NAME PASLEY, DIANE  
STREET ADDRESS 16267 ERIE PLACE  
CITY- ST- ZIP DAVIE FL

2.1 TITLE ☐ Change ☐ Addition

TITLE S ☐ DELETE

NAME CLINTON, LISA  
STREET ADDRESS 17930 NW 84TH AVE  
CITY- ST- ZIP MIAMI FL

3.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME CHIDO, LINDA  
STREET ADDRESS 2652 EDGEWATER DR  
CITY- ST- ZIP FT LAUDERDALE FL

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

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

Date

Daytime Phone #

CR2E034 (9/96)