2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P01000113643

FILED May 07, 2003 8:00 am Secretary of State 04-11-2003 90120 005 ***150.00

1. Entity Name BREWZZI AMERICA, INC.															
Principal Plat 301 YAMATO BOCA RATON		s	301 YA	Mailing Address 301 YANATO RD ₽3101 BOCA RATON FL 33431				55038414							
2. Principal I	ng Address														
Suite, Apt. #, etc.			Suite,	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES							
City & State			City &	City & State			A SEI Number			APPLIE			A	pplied For ot Applicable	<u>, </u>
Zip	Zip Country		Zip	Zip Cour			5. 0			5. Certificate of Status Desired \$8.75 Ad Fee Require					1
·	6. Name	and Address of Currer	nt Registered	istered Agent			7. Name and Address of New Registered Agent								ľ
MIRKIN, MARK H						Name Morris L. Sto-H.Z III. Street Address (P.O. Box Number is Not Acceptable)									
C/O MIRKIN & WOOLF, P.A.						Sheer	uoress (r	U. DUX	Numbers	NOL ACCE	ptable)				
1700 PALM BEACH LAKES BLVD #580							- V	~~~		Rd	- Cit	c გ	101		1
WEST PALM BEACH FL 33401							ora.	Ma Ma	ato r		<u>ان</u>	<u>ری</u> FL	Zinco	431	1
the obligat	named entity	y submits this statement ered agent:	for the purpos	e of changing its	registere			ed agent	, or both, i	n the State		a. 1 am far	niliar with	and accept	1
SIGNATURE	Signature, typed	or printed name of registered ac-	nt and title if applica	ible. (NOTE	: Registere	d Agent signan	re required v	when reinst	ating)			DATE			1
Afte	r May 1, 200	PEE IS \$150.00 Fee will be \$550.00 Florida Department				<u>. </u>				on Campa Fund Conti		cing		00 May Be d to Fees	1
10.		OFFICERS AN	D DIRECTORS	<u></u>	11.			ADDI	TIONS/CH	ANGES TO	OFFICE	RS AND C	RECTOR	S IN 11	1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	301 YAMA	IORRIS L II TO RD #3101 TON FL 33431		☐ Delete TT/L NAM STRI CITY			201	Yon	Sto	RO S	ste a	101	Change	Addition	
TITLE NAME STREET ADDRESS CHY-ST-ZIP	301 YAMA	ARCHIE II TO RD #3101 TON FL 33431				Ε	γρ Α. Λ π 301	rchie Stottz II Yamato Rd ste 3101 PCA Raton F1,33431						Addition	
title Name Street address		, CHARLES E TO RD #3101	·	Delete	TITLE NAME STRE								Change	Addition	
CITY-ST-ZIP	BOCA RAT	ON FL 33431			CITY-	ST-ZIP									J
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		,							Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		ſ					·) Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		-		☐ Delete	1	- 1						C] Change	Addition	
12. I hereby o	ertify that the	information supplied wit	th this filling do	es not qualify for	the exen	nption state	ed in Sect	tion 119	.07(3)(i), F	orida Stati	utes. I furt	her certify	that the in	nformation	(

indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

pichazure recoired

4/3/03