2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000113655

1. Entity Name

BREWZZI RESTAURANT MANAGEMENT, INC.



FILED Apr 28, 2008 08:00 AN Secretary of State

Fee Required

Principal Place of Business

301 YAMATO RD #3101 BOCA RATON, FL 33431 Mailing Address

301 YAMATO RD #3101 BOCA RATON, FL 33431



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04152008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For 30-0062530 Not Applicable

5. Certificate of Status Desired \$8.75 Additional

6. Name and Address of Current Registered Agent

STOLTZ, MORRIS L II 301 YAMATO ROAD SUITE 3101 BOCA RATON, FL 33431

DO NOT WRITE IN THIS SPACE

| 8. 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. I am familiar with, and accept the obligations of registered agent. | | | | | |
|--|--|--|------|--------------------------------|---|
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 | | Election Campaign Financi Trust Fund Contribution. | ng 🗆 | \$5.00 May Be Added to Fees | |
| 10. OFFICERS AND DIRECTORS | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P STOLTZ, MORRIS L II 301 YAMATO RD #3101 BOCA RATON, FL 33431 | | | | U00000924874 05/20/08-80004-008 150.00 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP STOLTZ, A ARCHIE II 301 YAMATO RD #3101 BOCA RATON, FL 33431 | | | | 03/20/00 3003/ 033 130.03 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | DO | NOT WRITE |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | • | · | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information 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. | | | | | |