

**FILED**  
**May 07, 2003 8:00 am**  
**Secretary of State**

05-07-2003 90156 007 \*\*\*150.00

**2003 FOR PROFIT CORPORATION  
 UNIFORM BUSINESS REPORT (UBR)**

<b>DOCUMENT # P02000133892</b> 1. Entity Name <b>BREWING ENTERPRISES, INC.</b>			
Principal Place of Business <b>1921 B 5TH AVENUE SOUTH                  ST. PETERSBURG, FL 33712</b>		Mailing Address <b>1921 B 5TH AVENUE SOUTH                  ST. PETERSBURG, FL 33712</b>	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address <b>717 West OHIO AVE</b> Suite, Apt. #, etc.	
City & State <b>TAMPA, FL</b>		City & State <b>TAMPA, FL</b>	
Zip <b>33603</b>		Zip <b>33603</b>	
Country		Country	
4. FEI Number <b>320048553</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent <b>FENSTERMACHER, BRIAN A                  1921 B 5TH AVENUE SOUTH                  ST. PETERSBURG, FL 33712</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent's signature required when distribution)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE <b>P</b> NAME <b>WINDER, STEVEN E</b> STREET ADDRESS <b>5645 WELLINGTON COURT</b> CITY-ST-ZIP <b>PALM HARBOR, FL 34685</b>	<input checked="" type="checkbox"/> Delete	TITLE <b>PRESIDENT</b> NAME <b>FENSTERMACHER, BRIAN A</b> STREET ADDRESS <b>717 WEST OHIO AVENUE</b> CITY-ST-ZIP <b>TAMPA, FL 33603</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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.			
SIGNATURE: <b>BRIAN FENSTERMACHER</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			

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☒ CHECK HERE IF MAKING CHANGES

CR2C04 (10/02)

Attachment  
90131394

Brian Fenstermacher  
President  
Brewing Enterprises, Inc.  
717 West Ohio Avenue  
Tampa, FL 33603

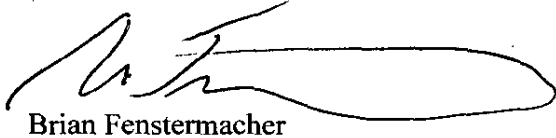
April 29, 2003

Florida Department of State  
Division of Corporations

To Whom It May Concern:

I request the electronic access code for document number P02000133892.

Thank you,



Brian Fenstermacher