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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000030965

1. Corporation Name

BREWMASTERS '54, INC.

FILED May 03, 1999 8:00 am Secretary of State 05-03-1999 90093 011 ***150.00



	· ·						
Principal Place	e of Business	Mailing Address					
5335 VILLAGE MKT.		5335 VILLAGE MKT.					
WESLEY CHAPEL FL 33543		WESLEY CHAPEL FL 33543		DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualifed	SPACE	 -	
	• *			04/21/1994			
Bringing Bi	lace of Business	2a. Mailing Address		4. FE! Number	Ann	fied For	
	lace of business		Watch Dr		 	Applicable	
Suite, Apt.	# etc	Suite, Apt. #, etc.	couler of		\$8.75 A		
	,, 5.6.	27	= ==	5. Certificate of Status Desired	Fee Req		
22 City & State		City & State		6. Election Campaign Financing	\$5.00 N	May Be	
23		28 Kiverview,	+L	Trust Fund Contribution	Added to		
Zip	Country	Zip	Country	8. This corporation owes the current year In	tangible		
24	25	29 33569 3	の は、つ。	Personal Property Tax.	[☑ Yes [□No	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	Agent		
			81 Name			Ì	
	IANN, VINCENT A		82 Street A	ddress (P.O. Box Number is Not Acceptable)			
	34 OLEY RIDGE COURT						
IAM	PA FL 33624		83			1	
			84 City		85 Zip C	ode	
				FL	- L_`		
office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State of familiar with, and accept the obligations.	if Florida. Such change was auth	nonzed by the corbor	orporation submits this statement for the purpose of ration's board of directors. I hereby accept the appo	changing its r intment as reg	egistered istered	
ayent. i a		0110 011 00000011 001 100000					
SIGNATURE							
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	egistered Agent signature rec		ND DIDECTOR		(80
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AND	and title if applicable. (NOTE: Re	egistered Agent signature rec	quired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A		RS IN 12	11/08)
SIGNATURE 12.	Signature, typed or printed name of registered agent OFFICERS AND	and title if applicable. (NOTE: Re	egistered Agent signature rec 13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change		4 (11/08)
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered agent OFFICERS AND P AUMANN, VINCENT A	and title if applicable. (NOTE: Re	egistered Agent signature rec 13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change		(11/08)
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SIGNATURE 12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent OFFICERS AND P AUMANN, VINCENT A 5335 VILLAGE MKT.	and title if applicable. (NOTE: Re	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change		2E034 (4
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SIGNATURE 12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AND P AUMANN, VINCENT A 5335 VILLAGE MKT.	and title if applicable. (NOTE: ReD DIRECTORS DELETE	egistered Agent signature rec 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS = 2.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS A	☐ Change Ve_ }	Addition	2E034 (4
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14. I 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, with all other like empowered.

4/28/99 813.671.0625