

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000049873 (0)

1. Corporation Name

NEW WORLD BREWING SYSTEMS, INC.



Principal Place of Business

2857 EXECUTIVE DR
CLEARWATER FL 34622

Mailing Address

2857 EXECUTIVE DR
CLEARWATER FL 34622

2. Principal Place of Business

21 7183 123rd CIRCLE N.

Suite, Apt. #, etc.

22

City & State

23 CLEARWATER, FLA.

24 34643

Country

25 PINELLAS

2a. Mailing Address

26 7183 123rd CIRCLE N.

Suite, Apt. #, etc.

27

City & State

28 CLEARWATER FLA.

29 34643

Country

30 PINELLAS

9. Name and Address of Current Registered Agent

STEPHENSON, RONALD L
100 2ND AVE S
12TH FLOOR
ST PETERSBURG FL 33701

3. Date Incorporated or Qualified
07/06/1994

3a. Date of Last Report
05/01/1995

4. FEI Number

59-3252869

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

10. Name and Address of New Registered Agent

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME SMITH, WONDEL JR.
STREET ADDRESS 2857 EXECUTIVE DR
CITY, ST, ZIP CLEARWATER FL 34622

TITLE ☒ DELETE

NAME SMITH, MARY
STREET ADDRESS 2857 EXECUTIVE DR
CITY, ST, ZIP CLEARWATER FL 34622

TITLE ☐ DELETE

NAME HOLBORN, PAUL J
STREET ADDRESS 2857 EXECUTIVE DR
CITY, ST, ZIP CLEARWATER FL 34622

TITLE ☐ DELETE

NAME JOHN H. KAVANAGH
STREET ADDRESS

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

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

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

7183 123rd CIRCLE N.
CLEARWATER, FLA. 34643

7183 123rd CIRCLE N.
CLEARWATER, FLA. 34643

JOHN H. KAVANAGH
7183 123rd CIRCLE N.
CLEARWATER, FLA. 34643

ROBERT SOLTYS
7183 123rd CIRCLE N.
CLEARWATER, FLA. 34643

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, unchanged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (12/95)