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PROFIT CORPORATION **ANNUAL REPORT**

1996



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

DOCUMENT #	P95000046372	(5)
1 Compression Name		· - /

MCPHEARSON'S AMERICAN BREWPUB INC.

Principal Place of Business Mailing Address 823 FRANKLIN ROAD W PALM BEACH FL 33405 W PALM BEACH FL 334					
				 Date Incorporated or Qualified 06/14/1995 	3a. Date of Last Report
· ·	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	41 - 2	26		65-058-84	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	e	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zıp	Country	8. This corporation has liability for i	ntangible tax under s 199.032,
24	25	29	30	Florida Statutes Yes	□No
	9. Name and Address of Cu	rrent Registered Agent	81 Name	10. Name and Address of New R	egistered Agent
CORPORATE CREATIONS ENTERPRISES, INC. 4521 PGA BLVD. SUITE 211 PALM BEACH GARDENS FL 33418		82 Street A. 83	Katherine Krill diress P.O. Box Number is Not Acceptable 3 Franklin Roo	RE Zin Code	
familiar wi	to the provisions of Sections 607.0 red agent, or both, in the State of th, and accept the obligations of,	Florida, Such change was autho	tutes, the above named corporation's h	poration submits this statement for the purposerd of directors. Thereby accept the appo	FL 33405
SIGNATURE			(NOTE Projectered Agenit signature req		7/26/96
12.	OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
NAME	KRILL, KATHERINE	ר"ו מנוגוג	1 1 TITLE	President + Oirector Krill, Katherine	Change 🔲 Addition
STREET ADDRESS	% 823 FRANKLIN ROAD			Bas Franklin Rd.	
	W PALM BEACH FL 3340	E	13 STREET ROUNT SC		131- 33/100-
CITY-ST-ZIP TITLE	W FALM BEACH PE 3340	DELETE	1.4 CITY - ST - ZIP	West Falm Beach	F1a 38405
NAME			2 1 TrTLE	vice president admi Charles Robert Huff	Clock Change Midition
STREET ADDRESS			2 2 NAME	2000 South Congr	855
			2 3 STREET ADDRESS	week from possi	F/0. 33
CITY-ST-ZIF		☐ DELETE	2 4 CITY - ST - ZIP 3 1 TITLE	west folm Beach	
	Į.		■ 3 + 111+,E		☐ Change ☐ Addition ☐

CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. Too hereby certify that the information supplied with this fling 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 13 if changed, or on an attachment with an address.

32 NAME

4 1 TITLE

4.2 NAME

5 1 TITLE

5 2 NAME

6 1 TITLE

6.2 NAME

33 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - \$1 - 2IP

4 4 CrTY - S1 - ZIP

3.4 CITY - ST - ZIP

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIF

CHTY-ST-ZIF

CITY-ST-ZIF

TITLE

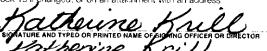
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