FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED May 03, 1999 8:00 am Secretary of State

05-03-1999 90093 009 ***150.00

DOCUMENT # P95000088302

BREWMASTERS OF ST. PETERSBURG BEACH, INC.

)]]]]]]
Principal Plac	e of Business	Mailing Address	/ .		_					
401 SECOND STREET EAST 5335 VILLAGE MARKET										
INDIAN ROCKS BEACH FL 33785		WESLEY CHAPEL FL 33543			ĺ		DO NOT WIDIT	E IN THIS	DACE	
US US						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed				
						11/16/1995	d or Qualifed			
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4.	FEI Number				plied For
21		26 8802 Eagle Watch Univ			mve	<u>59-3354449</u>				t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			1	_Certifcate_of_Sta	tus Desired	п		Additional
22		27							Fee R	equired
City & State		City & State	28 Kiverview, FL			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
Zip Country		Zip Country				8. This corporation owes the current year Intangible				
24	25	33569	30	u.S.		Personal Proper		•	Yes	□No
<u> </u>	9. Name and Address of Currer				10.	Name and Add	ress of New R	egistered A	gent	
	3, 110,000			81 Name						
AUN	IANN, VINCENT A					NO D 11-1	·			
1654	43 OLEY RIDGE COURT			82 Street	Address (P	P.O. Box Number	is Not Accepta	ole)		
TAM	IPA FL 33624			83						
	•									
		•		84 City				FL	85 Zip	Code
44 Rumuant	to the provisions of Sections 607.050	12 and 607 1508 Florida St	atutes the a	bove-named	corporation	n submits this sta	tement for the	ourpose of	hanging its	registered
office or i	registered agent, or both, in the State registered agent, and accept the obliga-	of Florida. Such change w	as authorize	a by the corb	oration's bo	oard of directors.	hereby accep	t the appoir	tment as re	gistered
	in lamilia wat, and decept the oblige	3110/10 01, 00040/1 001100	, , , , , , , , , , , , , , , , , , , ,	,			•			}
SIGNATURE	Signature, typed or printed name of registered age	ant and title if applicable. (I	NOTE: Registere	Agent signature i	required when r	reinstating)		DATE		
12,	OFFICERS AND DIRECTORS					ADDITIONS/CHA	NGES TO OF	ICERS AN		
TITLE	MD	DELET	1.1 T	TLE	Pres	ident.			Change	Addition
NAME	AUMANN, VINCENT A		1.2 N	AME	John	, Christ	en c.			ſ
STREET ADDRESS	5335 VILLAGE MARKET		1.3 \$	TREET ADDRESS	5819	a Marin	ner Str	ret		[
CITY-ST-ZIP	WESLEY CHAPEL FL 33543		1.4.0	ITY-ST-ZIP	Tan	noa. FL	336	09: _		
TITLE		OELETE	Ē 2.1 T	TLE		0 1			☐ Change	☐ Addition
NAME	· ·	••	2.2 N	AME						
STREET ADDRESS	}		2.3 \$	TREET ADDRESS]	. •	•	-		,
				CITY-ST-ZIP						
TITLE	 	☐ DELETI			 				☐ Change	☐ Addition
	,	•	3.2 N		ĺ					f
NAME	Į.			TREET ADDRESS	1					
STREET ADDRESS	}			,	1					J
CITY-ST-ZIP	 	☐ DELETI		OTY-ST-ZIP	 -				Change	Addition
TITLE	j	() VELL II]					
NAME				KAME						Į
STREET ADDRESS	·			TREET ADDRESS						
CITY-ST-ZIP				ITY-ST-ZIP	1 .					1
TITLE					+			<u> </u>	[] Chanca	Addition
NAME	<u> </u>	DELET	_	ITLE	 			•	Change	☐ Addition
IVANE		☐ DELET	5.2 N	ITLE AME				•	Change	Addition
STREET ADDRESS		☐ DELET	5.2 N	ITLE IAME TREET ADDRESS				•	Change	Addition
		☐ DELETI	5.2 N 5.3 S 5.4 C	ITLE IAME TREET ADDRESS ITY-ST-ZIP					Change	☐ Addition

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.

6.4 CITY-ST-ZIP

62 NAME

6.3 STREET ADDRESS

☐ DELETE

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP