

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON 02/29/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0104860

PROFIT CORPORATION ANNUAL REPORT		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000018756 (2)			
1. Corporation Name BLACK BEAR BREWING COMPANY			
Principal Place of Business 542 DOUGLAS AVENUE DUNEDIN FL 34698		Mailing Address 542 DOUGLAS AVENUE DUNEDIN FL 34698	
2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.	
22 City & State		27 City & State	
23 Zip		28 Country	
24		29	
9. Name and Address of Current Registered Agent AMERILAWYER CHARTERED 343 ALMERIA AVENUE CORAL GABLES FL 33134			
81 Name Spiegel & Utrera, P.A.			
82 Street Address (P.O. Box Number is Not Acceptable) 343 Almeria Avenue			
83			
84 City Coral Gables			
85 Zip Code FL 33134			
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. I am familiar with and accept the provisions of section 607.0505, Florida Statutes.			
SIGNATURE By: <u>Natalia Utrera, Vice-President</u> DATE <u>5/14/99</u>			
12. OFFICERS AND DIRECTORS			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE PD		11 TITLE	
NAME BROWN, PAUL C JR.		12 NAME	
STREET ADDRESS 542 DOUGLAS AVENUE		13 STREET ADDRESS	
CITY-ST-ZIP DUNEDIN FL 34698		14 CITY-ST-ZIP	
TITLE STD		21 TITLE	
NAME RODGERS, JOHN B		22 NAME	
STREET ADDRESS 542 DOUGLAS AVENUE		23 STREET ADDRESS	
CITY-ST-ZIP DUNEDIN FL 34698		24 CITY-ST-ZIP	
TITLE		31 TITLE	
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	
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			
SIGNATURE: <u>Paul Brown</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

99 MAY 12 PM 1:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT 98-09
DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/29/1996	
4. FEI Number 59-3362464	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10. Name and Address of New Registered Agent	

CR2E034 (5/98)

3TD
Tranum John G.
411 72nd Way NE
Olympia, WA 98504
200002874422-3
-05/13/99--01108--002
****900.00 ****900.00

5/5/99 6404082-6049
Date Daytime Phone #