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 012 ***150.00

DOCUMENT #	P970000523	۱7

1. Corporation Name

BREWMASTERS OF CHARLOTTE, INC.

	_ 			
Principal Plac	e of Business	Mailing Address		
175 KINGS HIG		5335 VILLAGE MARKET		
PUNTA GORDA	A FL 33983	WESLEY CHAPEL FL 33543	•	DO NOT WRITE IN THIS SPACE
US		U\$,	3. Date Incorporated or Qualifed
				06/12/1997
2 Principal P	Place of Business	2a, Mailing Address		4. FEI Number . Applied For
2. Filliopari	ace of Busiless	26 8802 Eagle W	latch Dri	
Suite, Apt.	# etc.	Suite, Apt. #, etc.		\$8.75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & Stat	le	City & State		6. Election Campaign Financing 55.00 May Be
23		28 Kiverview, 1	FL	Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
24	25	29 33569 30	l us.	Personal Property Tax.
	9. Name and Address of Current			10. Name and Address of New Registered Agent
	,		81 Name	
	MANN, VINCENT A		82 Street	Address (P.O. Box Number is Not Acceptable)
	34 OLEY RIDGE COURT		02 30990	Address (F.O. dox rainings is fact Addeptional)
TAM	IPA FL 33624		83	
				Tool 7's Ordo
			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 r	registered agent, or both, in the State of am familiar with, and accept the obligat	of Florida. Such change was autho	orized by the corp	oration's board of directors. I hereby accept the appointment as registered
SIGNATURE				required when reinstating) DATE
	Signature, typed or printed name of registered agent OFFICERS ANI			required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P OFFICERS ANI	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
	l '			_ + _
NAME	AUMANN, VINCENT A		1.2 NAME	BANZ Eagle Watch Drive
STREET ADDRESS	5335 VILLAGE MARKET WESLEY CHAPEL FL 33543	:	1.3 STREET ADDRESS	8802 Eagle Watch Drive Riverview, FL 33569
CITY-ST-ZIP	WESLET CHAPEL FL 33343	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	Change Addition
TITLE		Decere		j January
NAME			2.2 NAME	
STREET ADDRESS		·	2.3 STREET ADDRESS	
CITY-ST-ZIP		Christs	2.4 CITY-ST-ZIP	Change Addition
TITLE		☐ DELETE	3.1 TITLE	Change CAUGILOTS
NAME		ļ	3.2 NAME	
STREET ADDRESS	<u> </u>		3.3 STREET ADDRESS	1
CITY-ST-ZIP			3.4. CITY-ST-ZIP	DALL ELLE.
TITLE	}	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	1	ſ	4.2 NAME	1
STREET ADDRESS		ļ	4.3 STREET ADDRESS	'
CITY-ST-ZIP	<u> </u>		4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		ļ	5.2 NAME	·
STREET ADORESS	}	`	.5.3 STREET ADDRESS	}
CITY-ST-ZIP		_	5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	[6.2 NAME	[
STREET ADDRESS	1	ļ	6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	
	L			

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. SIGNATURE: