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Secretary of State

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Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **V44832**

1. Corporation Name

Principal Place of Business

## HEINEKEN LATIN AMERICA AND CARIBBEAN INCORPORATE

2. Principal Place of Business   2s. Mailing Address   4. FET Number   65-0346038   Applied for zero   21   22   27   Applied for zero   4. FET Number   5. Certificate of Status Desired   58.75 Additional price to the provisions of Sections 67 200 Applied for zero   22   28   29   29   29   29   29   29	800 DOUGLAS ROAD SUITE 201 CORAL GABLES FL 33134 US		800 DOUGLAS ROAD SUITE 201 CORAL GABLES FL 33134 US				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed						
2. Principal Place of Business   2a			••			\							
Suite, Apt. 8; etc.    Suite, Apt. 8; etc.   Suite, Apt. 8; etc.   Suite, Apt. 8; etc.   City & State     City & State     City & State     29	— · · · · · · · · · · · · · · · · · · ·						4. FEI Number			<del></del>			
City & State 23	Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certifcate of	of Status Desired					
Zip							•						
Zip													
S. Name and Address of Current Registered Agent  CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FIL 33324  151   Sircet Address (P.O. Box Number is Not Acceptable)  152   Sircet Address (P.O. Box Number is Not Acceptable)  153   Sircet Address (P.O. Box Number is Not Acceptable)  154   City		Zip Country Zip C					•		rent year Int			7	
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION F1 33324  82 Sirrest Address (P.O. Box Number is Not Acceptable)  11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Fiornia Statutes, the early office or registered agent, to both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent, to 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, to 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, to 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, to 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, the such as a su	24												
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324  82 Street Address (P.O. Box Number is Not Acceptable)  84 City  FL  85 Zip Code  FL  85 Zip Code  FL  86 City  FL  86 Size and address (P.O. Box Number is Not Acceptable)  86 City  FL  87 Zip Code  FL  88 Size and address (P.O. Box Number is Not Acceptable)  88 Size and address (P.O. Box Number is Not Acceptable)  89 City  FL  80 Size and Sor Acceptable)  80 City  FL  80 Size and Sor Acceptable)  81 Size and Address (P.O. Box Number is Not Acceptable)  88 Size and Address (P.O. Box Number is Not Acceptable)  88 Size and Address (P.O. Box Number is Not Acceptable)  88 Size and Address (P.O. Box Number is Not Acceptable)  88 Size and Address (P.O. Box Number is Not Acceptable)  88 Size and Address (P.O. Box Number is Not Acceptable)  88 Size and Address (P.O. Box Number is Not Acceptable)  88 Size and Address (P.O. Box Number is Not Acceptable)  88 Size and Address (P.O. Box Number is Not Acceptable)  88 Size and Address (P.O. Box Number is Not Acceptable)  88 Size and Acceptable)  88 Size and Address (P.O. Box Number is Not Acceptable)  88 Size and Acceptable (P.C. Box Number is Not Acceptable)  89 Size and Acceptable (P.C. Box Number is Not Acceptable)  89 Size and Acceptable (P.C. Box Number is Not Acceptable)  88 Size and Acceptable (P.C. Box Number is Not Acceptable)  89 Size and Acceptable (P.C. Box Number is Not Acceptable)  89 Size and Acceptable (P.C. Box Number is Not Acceptable)  89 Size and Acceptable (P.C. Box Number is Not Acceptable)  89 Size and Acceptable (P.C. Box Number is Not Acceptable (P.C. Box Number is Not Acceptable)  89 Size and Acceptable (P.C. Box Number is Not Acceptable		9. Name and Address of Current	Registered Agent	817	N-		TV. Name and	Address of New	Registered	Agent			
1200 SOUTH PINE ISLAND ROAD   1200 SOUTH PINE ISLAND ROAD   PLANTATION FL 33324   83   84   City   FL   85   Zip Code	СТ	CORPORATION SYSTEM											
### 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 affice 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 affice or registered agent applications of, Section 607 0505, Florida Statutes.  #### SIGNATURE  ### SIGNATURE  ### SIGNATURE  ### OFFICERS AND DIRECTORS  ### 12 NAME  ### OFFICERS AND DIRECTORS IN 12  ### OFFICERS AND DIRECTOR	The state of the s			82	Sti	treet Address	Address (P.O. Box Number is Not Acceptable)						
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florids 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 affice 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, if an familiar with, and accept the change was authorized by the corporation's board of directors. I hereby accept the appointment as registered affice of the corporation's board of directors. I hereby accept the appointment as registered affice of the corporation's board of directors. I hereby accept the appointment as registered affice of the corporation's board of directors. I hereby accept the appointment as registered affice of the corporation's board of directors. I hereby accept the appointment as registered affice of the corporation's board of directors. I hereby accept the appointment as registered affice of the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the appointment as registered agent, and accept the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the corporation's board of directors. I hereby accept the appointment as registered agent and directors. I hereby accept the appointment as registered agent and accept the corporation accept the corporation of directors. I hereby accept the appointment as registered agent and accept the corporation accept the corporation acc	PLANTATION FL 33324			83			_ <del>-</del>					-	
The provisions of Sections 607.6502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the composition's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the composition's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes,  SIGNATURE    Signature, typed or printed name of registered agent and 106 if applicable.   (INFOTE Registered Apent signature required when retirability)   DATE				84	Ci	ity				85	Zip Co	de	
SIGNATURE    Signature   Signa							41	is atotomont for the	FL	changin	a ito re	nietorod	
SIGNATURE    Signature   Signa	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.												
TITLE PST DUGLAS RODNEY DUGLAS RODNEY 12 NAME HABBERSHAW, G RODNEY 12 NAME STREET ADDRESS REET ADDRESS RETERINGPLANTSOER 21 COTAL GABLES FL 22 NAME 22 NAME NAME PINOTSIS, NICOLAOS STREET ADDRESS ROD DUGLAS ROAD, SUITE 201 COTAL GABLES FL 22 NAME 23 STREET ADDRESS ROD DUGLAS ROAD, SUITE 201 COTAL GABLES FL 22 NAME 24 CITY-ST-ZIP COTAL GABLES FL 33 13 4 CITY-ST-ZIP COTAL GABLES FL 33 13 4 CITY-ST-ZIP COTAL GABLES FL 33 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 33 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 33 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 34 CITY-ST-ZIP COTAL GABLES FL 34 CITY-ST-ZIP COTAL GABLES FL 35 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 34 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 34 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 34 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 35 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 34 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 34 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 33 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 33 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 33 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 33 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 33 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 33 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 33 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 33 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 33 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 33 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 33 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 33 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 33 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 33 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 33 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 33 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 35 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 35 STREET ADDRESS ROAD, SUITE 201 COTAL GABLES FL 35 STREET ADDRESS ROAD, SUITE 201 COTAL GA	SIGNATURE												
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NAME ARCHER, LEROY H 62 NAME			☐ DELETE							Cha	nge	☐ Addition	
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CORAL GABLES FL 33134 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 an an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

18th January 1999

305-461-2616