

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000003694

FILED
Apr 18, 2006
Secretary of State

Entity Name: LABATT BREWING COMPANY LIMITED

Current Principal Place of Business:

207 QUEEN'S QUAY WEST
SUITE 299
TORONTO, CA M5J 1A7 OC

New Principal Place of Business:

Current Mailing Address:

207 QUEEN'S QUAY WEST
SUITE 299
TORONTO, CA M5J 1A7 OC

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: AS () Delete
Name: ARSENAULT, CHRISTINE A
Address: 249 RANLEIGH AVE
City-St-Zip: TORONTO, ONT, CA M4N 1X3 CA

Title: D () Delete
Name: BRITO, CARLOS ALVES
Address: 207
City-St-Zip: QUEEN'S QUAY WEST, ON M5J1A7 CA

Title: D () Delete
Name: STALEY, GRAHAM
Address: 207 QUEEN'S QUAY WEST STE 299
City-St-Zip: TORONTO, ONT, CA M5J A17

Title: D () Delete
Name: RABKIN, SUSAN M
Address: 303 RICHMOND STREET
City-St-Zip: LONDON, ONT, CA N6B 2H8 CA

Title: T () Delete
Name: HURST, DEREK
Address: 207 QUEEN'S QUAY WEST
City-St-Zip: TORONTO, ONT, CA M5J1A7 CA

Title: AS () Delete
Name: JIM, WEST
Address: 207 QUEEN'S QUAY WEST STE 299
City-St-Zip: TORONTO, ON, CA M5J 1A7 CA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ARSENAULT, CHRISTINE A
Address: 207 QUEEN'S QUAY W
City-St-Zip: TORONTO, ONT, CA M5J 1A7 CA

Title: D (X) Change () Addition
Name: PATRICIO, MIGUEL
Address: 207
City-St-Zip: QUEEN'S QUAY WEST, ON M5J1A7 CA

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JIM WEST

AS

04/18/2006

Electronic Signature of Signing Officer or Director

Date