

RECORDATION FORM COVER SHEET
TRADEMARKS ONLY

06-15-2001



101752589

TO THE ASSISTANT COMMISSIONER OF PATENTS AND TRADEMARKS: Please record the attached

1. Name of conveying party(ies): (If multiple assignors, list numerically)

CERMEX INTERNATIONAL INC.

- Individual
- Association
- General Partnership
- Limited Partnership
- Corporation - State California
- Other:

6-11-01

Additional name(s) of conveying party(ies) attached?
 Yes No

2. Name and address of receiving party(ies):

Name: KNOBBE, MARTENS, OLSON & BEAR, LLP
Internal Address: Sixteenth Floor
Street Address: 620 Newport Center Drive
City: Newport Beach State: Ca ZIP: 92660

- Individual
- Association
- General Partnership
- Limited Partnership
- Corporation - State
- Other:

If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No

(Designations must be a separate document from Assignment)
Additional name(s) and address(es) attached?
 Yes No

3. Nature of conveyance:

- Assignment
- Merger
- Security Agreement
- Change of Name
- Other: Security Interest

Execution Date: (If multiple assignors, list execution dates in numerical order corresponding to numbers indicated in 1 above) April 4, 2001

4. Application number(s) or registration number(s):

- a. Trademark Application No(s):
- b. Trademark Registration No(s): See Attached Listing

Additional numbers attached? Yes No

2187900

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: James B. Bear
KNOBBE, MARTENS, OLSON & BEAR, LLP
Customer No. 20,995
Internal Address: Sixteenth Floor
Street Address: 620 Newport Center Drive
City: Newport Beach State: CA ZIP: 92660
Attorney's Docket No.: CERMEX.001T

7. Total fee (37 CFR 3.41): \$240.00

- Enclosed
- Authorized to be charged to deposit account

8. Deposit account number: 11-1410

Please charge this account for any additional fees which may be required, or credit any overpayment to this account.

ASSIGNMENT DIVISION
RECEIVED
MAY 15 2001

6. Total number of applications and registrations involved: 9

9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct, and any attached copy is a true copy of the original document.

James B. Bear
Name of Person Signing

6/7/01
Date

Total number of pages including cover sheet, attachments and document: 3

Mail documents to be recorded with required cover sheet information to:

06/14/2001 LMUELLER 00000107 2187900

01 FC:481
02 FC:482

40.00 DP
200.00 DP

U.S. Patent and Trademark Office
Attn: Assignment Division
Crystal Gateway-4
1213 Jefferson Davis Highway, Suite 320
Arlington, VA 22202

TRADEMARK
REEL: 002314 FRAME: 0417

EXHIBIT "A"

Title: PILSNER SUPERIOR CERVEZA
Registration Number: 2187900
Registered: 9/8/98

Title: BANDIDO
Trademark Application Number: 75/841317
Filed: 11/5/99

Title: BANDIDO AND DESIGN
Trademark Application Number: 75/541553
Filed: 8/24/98

Title: MEXICALI
Registration Number: 2093334
Registered: 9/2/97

Title: MEXICALI
Registration Number: 2145057
Registered: 3/17/98

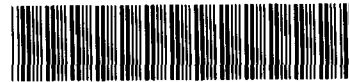
Title: TONATIUH
Trademark Application Number: 75/816379
Filed: 10/6/99

Title: TONALA
Trademark Application Number: 75/827107
Filed: 10/20/99

Title: ZAPOPAN
Trademark Application Number: 75/827103
Filed: 10/20/99

Title: STALLION
Trademark Application Number: 75/939980
Filed: 3/9/00

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FINANCING STATEMENT - FOLLOW INSTRUCTIONS CAREFULLY

This Financing Statement is presented for filing pursuant to the Uniform Commercial Code and will remain effective, with certain exceptions, for 5 years from date of filing.

A. NAME & TEL. # OF CONTACT AT FILER (optional)		B. FILING OFFICE ACCT. # (optional)	
C. RETURN COPY TO* (Name and Mailing Address)			
<p>Bill Jones, Secretary of State 1500 Capitol Mall, Sacramento, CA 95833 Telephone: (916) 227-3300 Fax: (916) 227-3301</p>			
D. OPTIONAL DESIGNATION (if applicable)		NON-UCC FILING	

FILED
SACRAMENTO, CA
APR 04, 2001 AT 0800
BILL JONES
SECRETARY OF STATE

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b)

1a. ENTITY'S NAME				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS		CITY	STATE	COUNTRY POSTAL CODE
1d. S.S. OR TAX ID #	OPTIONAL ADD'NL INFO RE ENTITY/DEBTOR	1e. TYPE OF ENTITY	1f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION	1g. ENTITY'S ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b)

2a. ENTITY'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	COUNTRY POSTAL CODE
2d. S.S. OR TAX ID #	OPTIONAL ADD'NL INFO RE ENTITY/DEBTOR	2e. TYPE OF ENTITY	2f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION	2g. ENTITY'S ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE

3. SECURED PARTY'S (ORIGINAL S/P or ITS TOTAL ASSIGNEE) EXACT FULL LEGAL NAME - insert only one secured party name (3a or 3b)

3a. ENTITY'S NAME				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS		CITY	STATE	COUNTRY POSTAL CODE

4. This FINANCING STATEMENT covers the following types or items of property:

5. CHECK <input type="checkbox"/> This FINANCING STATEMENT is signed by the Secured Party instead of the Debtor to perfect a security interest		7. If filed in Florida (check one)	
BOX (a) in collateral already subject to a security interest in another jurisdiction when it was brought into this state, or when the debtor's location was changed to this state, or (b) in accordance with other statutory provisions [additional data may be required]		<input type="checkbox"/> Documentary stamp tax paid <input type="checkbox"/> Documentary stamp tax not applicable	
6. REQUIRED SIGNATURE(S)		8. <input type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Attach Addendum [if applicable]	
		9. Check to REQUEST SEARCH CERTIFICATE(S) on Debtor(s) [ADDITIONAL FEE] (optional) <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2	