

# 2000 UNIFORM BUSINESS REPORT (UBR)

Document #

G16783

1. Entity Name

The Beach Collection, Inc. (TM)

Principal Place of Business

Mailing Address

3835 Pembroke Road  
Hollywood, Florida 33021

3835 Pembroke Road  
Hollywood, Florida 33021

2. Principal Place of Business

3835 Pembroke Road

Suite, Apt. #, etc.

3. Mailing Address

4851 Pembroke Road

Suite, Apt. #, etc.

City & State

Hollywood, Florida

City & State

Hollywood, Florida

4. FEI Number

592329588

Applied For

Not Applicable

Zip

33021

Country

USA

Zip

33021

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name  
Paul M. Volmert, P.A.

Street Address (P.O. Box Number is Not Acceptable)  
1975 East Sunrise Blvd., Suite 523

City Fort Lauderdale

FL

Zip Code  
33304

Oscar Guzman

45 NE 180th Street

Miami Beach, Florida 33162

8. 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

Signature, typed or printed name of registered agent and title if applicable

NOTE: Registered Agent signature when reinstating

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so-  
(See criteria on back) ☐

FILE NOW !!! FEE IS \$150.00  
After MAY 1, 2000 Fee will be \$550.00  
Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/ CHANGES TO OFFICERS AND DIRECTORS IN 11

| TITLE                 | NAME         | STREET ADDRESS   | CITY - ST - ZIP       | TITLE        | NAME               | STREET ADDRESS           | CITY - ST - ZIP                                                              |
|-----------------------|--------------|------------------|-----------------------|--------------|--------------------|--------------------------|------------------------------------------------------------------------------|
| PRESIDENT & SECRETARY | OSCAR GUZMAN | 4851 PEMBROKE RD | HO 114000 D, FL 33021 | Oscar Guzman | 4851 Pembroke Road | Hollywood, Florida 33021 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| SECRETARY             | OSCAR GUZMAN | SAME AS ABOVE    |                       |              |                    |                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
|                       |              |                  |                       |              |                    |                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
|                       |              |                  |                       |              |                    |                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
|                       |              |                  |                       |              |                    |                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
|                       |              |                  |                       |              |                    |                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
|                       |              |                  |                       |              |                    |                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

7/7/00

954-985 9493

Signature and typed name of signing officer or director

Day

Daytime Phone #

KE

7/18