## 2004 FOR PROFIT CORPORATION

## ANNUAL REPORT FILED Jan 12, 2004 08:00 AM DOCUMENT # H27492 **Secretary of State** 1. Entity Name B & Z BEACHWARE, INC. Mailing Address Principal Place of Business 20201 W OAKHAVEN CIR 20201 W OAKHAVEN CIR MIAMI, FL 33179 US MIAMI, FL 33179 No Chg-P CR2E034 (10/03) 01062004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2526595 Not Applicate \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent YUZ, BEVY DO NOT WRITE 20201 W OAKHAVEN CIRCLE NORTH MIAMI BEACH, FL 33179 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE\_ Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE YUZ, BEVY BEATRICE NAME 20201 W OAKHAVEN CIR STREET ADDRESS NORTH MIAMI BEACH, FL CITY-ST-7/P U000000002044 TITLE 01/12/04-80036-008 150.00 NAME STREET ADDRESS CITY - ST- ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

EDIOR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: