2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004774

Entity Name: STREET BEAT, INCORPORATED

FILED Jan 26, 2005 Secretary of State

Current Pr	incipal Place o	of Business:	New Princ	New Principal Place of Business:			
103 N W 10 SOUTH BA)TH AVE ,Y, FL 33493						
Current Mailing Address:			New Maili	New Mailing Address:			
P. O. BOX SOUTH BA	972 Y, FL 33493	US					
FEI Number:	65-0646408	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desire	ed ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
1101 CHOF	KENNETH K J RUS WAY LM BEACH, FL						
The above in the State		ıbmits this statement for the pu	rpose of changing i	ts registered of	fice or registered agent,	or both,	
SIGNATUR	:E:						
Electronic Signature of Registered Agent			t		Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	SILEO, GERARD 2327 WINDSOR		Title: Name: Address: City-St-Zip:	P (X) HENNES, ROBE 9091 BRANDY L LAKE WORTH, F	ANE		
Title: Name: Address: City-St-Zip:	D ()E HARRIETT, DESI 102 BROOK WO WEST PALM BE	OD WAY	Title: Name: Address: City-St-Zip:	()(Change () Addition		
Title: Name: Address: City-St-Zip:	D () E JACKSON, MICH 235 S.W. 2ND AV SOUTH BAY, FL	/E.	Title: Name: Address: City-St-Zip:	D (X) GERBER, SAND 629 H COVENAN BELLE GLADE,	IT DRIVE		
Title: Name: Address: City-St-Zip:	ED () E JACKSON, KENN 1101 CHORUS W ROYAL PALM BE	/AY	Title: Name: Address: City-St-Zip:	D (X) JACKSON, MICH 335 SW 2ND AV SOUTHBAY, FL	ENUE		
Title: Name: Address: City-St-Zip:	T () E NEITA, ANDREW 1025 GRANDVIE ROYAL PALM BE	W CIRCLE	Title: Name: Address: City-St-Zip:	()(Change () Addition		
Title: Name: Address: City-St-Zip:	D () D JOHNSON,, LIND 160 NW 7TH AVE SOUTH BAY, FL	E. PO BOX 644	Title: Name: Address: City-St-Zip:	()	Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL JACKSON D 01/26/2005