

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000126284

Entity Name: BEACHSIDE BEEF'S, INC.

FILED
May 17, 2006
Secretary of State

Current Principal Place of Business:

5675 N. ATLANTIC AVENUE #122
COCOA BEACH, FL 32932 US

New Principal Place of Business:

Current Mailing Address:

5675 N. ATLANTIC AVENUE #122
COCOA BEACH, FL 32932 US

New Mailing Address:

FEI Number: 20-1629299

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOUVIER, PAUL A
3210 N. WICKHAM ROAD
5
MELBOURNE, FL 32935 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DTS () Delete
Name: SISLER, MICHAEL
Address: 5675 N ATLANTIC AVE #122
City-St-Zip: COCOA BEACH, FL 32932

Title: DVP () Delete
Name: MCLACHLAN, SCOTT
Address: 5675 N ATLANTIC AVE #122
City-St-Zip: COCOA BEACH, FL 32932

Title: D () Delete
Name: HAGAN, JAMES
Address: 4711 BABCOCK ST. NE
City-St-Zip: PALM BAY, FL 32905

Title: D () Delete
Name: DURKIN, JOSEPH
Address: 807 NASSAU ROAD
City-St-Zip: COCOA BEACH, FL 32931

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

Title: DP () Change (X) Addition
Name: CONWELL, JOHN
Address: 502 TOPSAIL DRIVE
City-St-Zip: ROCKLEDGE, FL 32955

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: SCOTT MCLACHLAN

DVP

05/17/2006

Electronic Signature of Signing Officer or Director

_____ Date