FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(1)

A & A BEACH STYLE, INC.

FILED

Mar 27 1998 8:00am

Secretary of State

| Principal Place of Business Mailing Address | | | | | | | ASBOT MINIS DINES AT | | |
|---|---|--|--------------------------------------|---|--------------|---|--------------------------------|-------------|--|
| A-A BEACH 12008 FROM | style It beach RD. | 12808 FRONT BEACH ROAD PANAMA CITY FL 32401 | | | | : | | | |
| | TY BEACH FL 32402 | | | | | DO NOT WRITE IN THIS SPACE | | | |
| US | | | | | | 3. Date incorporated or Qualified 09/21/1992 | | | |
| 2. Principal P | Place of Business | 2a. Mailing Address | | | | 4. FEI Number | - IAI | oplied For | |
| 21 | | 26 | 26 | | | 59-3128643 | Not Applicable | | |
| Sulte, Apt. #, etc. | | Suite, Apt. #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | | |
| City & Stat | е | City & State | City & State | | | 6. Election Campaign Financing | \$5.00 | May Be | |
| 23 | | 28 | . | | | Trust Fund Contribution | | to Fees | |
| Zip | Country | Zip | Country | | | 8. This corporation owes or has paid the | | | |
| 24 | 25 | 29 | | | | Personal Property Tax due June 30. Yes No | | | |
| | 9. Name and Address of Curr | ent Registered Agent | | 81 N | 1 | 10. Name and Address of New Register | ad Agent | | |
| | UINTANA, EDMUND D. | | | " | Name | | | | |
| | 21 MCKENZIE AVE. ANAMA CITY FL 32401 | | | 82 S | Street Addre | ess (P.O. Box Number is Not Acceptable) | | | |
| | | | | 63 | | | | | |
| | | | | B4 C | City | | L 85 Zip | Code | |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | | | |
| SIGNATURE Signature, typicd or proted name of registered agent and title if approable. (NOTE: Registered Agent signature required when reinstating) DATE | | | | | | | | | |
| 12. | OFFICERS A | ND DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFICERS A | AND DIRECTOR | RS IN 12 | |
| TITLE | D DELETE | | 1,1 T | 1.1 TITLE | | | Change | Addition | |
| NAME | BENSADOUN, ALBERT | | 1.2 NA | 1.2 NAME 1.3 STREET ADDRESS | | | | | |
| STREET ADDRESS | 177 KIMBERLY DRIVE | | 1.3 \$1 | | | | | | |
| CITY-ST-ZIP | PANAMA CITY FL | | 1.4 CITY - ST - ZIP | | IP . | | | | |
| TITLE | | | | 21 TITLE | | | Change | Addition | |
| NAME | | | 2.2 NAME | | | | | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | DRESS (| | | ĺ | |
| CITY-ST-ZIP | | [] or ext | 2. 4 CITY-ST-ZIP | | IP | | 100 | Address | |
| TITLE | | DELETÉ | | | | | Change | ☐ Addition | |
| NAME | | | 3.2 NAME | | | | | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | | | | J | |
| CITY-ST-ZIP TITLE | | DELETE | 3.4. CITY - ST - ZIP ELETE 4.1 TITLE | | :PP | | Change | Addition | |
| NAME | | _ occit | 4.1 IIILE 4.2 NAME | | | | CHICHING THE | | |
| STREET ADDRESS | | | | ame Freet add | ADEGG | | | ŀ | |
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| CITY-ST-ZIP TITLE | | | | 4.4 CITY - ST - ZIP 5.1 TITLE | | | Change | Addition | |
| NAME | | | | | | | onlingv | | |
| STREET ADDRESS | AFSS | | | 5.2 NAME 5.3 STREET ADDRESS | | | | ļ | |
| CITY-ST-ZIP | | | | 5.4 CITY-XI-XIP | | | | ļ | |
| TITLE | | DELETE 6.1T | | 11 \ | | | Change | Addition | |
| NAME | | <u> </u> | 6.2 N/ | 4 ' | / // | | | | |
| STREET ADDRESS | | | | REE | DRESS | | | 1 | |
| CITY-ST-ZIP | | | | TY-ST ZI | <i>)</i> / | \ | | | |
| | certify that the information supplied | with this filing does not qualify | | | | Section 119.07(3)(I), Florida Statutes. I further | certify that the | information | |

indicated on this annual report or supplemental annual report is true and accurate and that missignature 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 12 or Block 13 if changed, or on an attachment with an address.