

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000004774

**FILED**  
**Mar 31, 2014**  
**Secretary of State**  
**CC9521509484**

**Entity Name:** STREET BEAT, INCORPORATED

**Current Principal Place of Business:**

205 S.E. 3RD AVENUE  
SUITE C  
SOUTH BAY, FL 33493

**Current Mailing Address:**

P. O. BOX 972  
SOUTH BAY, FL 33493

**FEI Number: 65-0646408**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

JACKSON, KENNETH KJR  
1616 E. MAIN STREET  
PAHOKEE, FL 33476 US

*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

**Officer/Director Detail :**

Title P, PRESIDENT  
Name LOCKETT, THOMAS  
Address 2040 FOXTAIL VIEW COURT  
City-State-Zip: WEST PALM BEACH FL 33411

Title S  
Name MESSAM, WAYNE  
Address 220 S.W. 7TH AVENUE  
City-State-Zip: SOUTH BAY FL 33494

Title T  
Name DOWERS, CHEIKTHA  
Address 1432 S.W. AVENUE H  
City-State-Zip: BELLE GLADE FL 33430

Title D  
Name MULLINS, VIVIAN  
Address 2531 S.W. 14TH TERRACE  
City-State-Zip: PAHOKEE FL 33476

Title D  
Name DOWDELL, MARJORIE  
Address 316 N.W. 12TH DRIVE  
City-State-Zip: BELLE GLADE FL 33430

*I hereby 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 all other like empowered.*

**SIGNATURE: THOMAS LOCKETT**

**PRESIDENT**

**03/31/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date