2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 04, 2005 08:00 AM

DOCUMENT # 431151 1. Entity Name BETA INDUSTRIES, INC.					Secre	tary o	1 State
P.O. BOX 523663 P.O. BOX 52366		Mailing Address P O BOX 523663 P.O. BOX 523663 MIAMI, FL 33152-3663 US					NA NIJAH KANJANA WATANI
DO NOT WRITE IN THIS SPA			CE	04072005 4. FEI Numbe 59-1482	No Chg-P	CR2E034	
CASERTA, BERNARD 6900 NW 52 ST MIAMI, FL 33166 8. The above named entity submits this statement for the purpose of changing its register the obligations of registered agent.			DO NOT WRITE IN THIS SPACE red office or registered agent, or both, in the State of Florida. I am familiar with, and accept				
SIGNATURE	Signature, typed or printed name of registered agent and the	d Agent signature require	when reinstating)		DATE		
		Trust Fund Contribution.	Add	ed to Fees	נוסססס	0362681	005 150.00
TITLE NAME STREET ADDRESS CMY-ST-ZIP TITLE NAME STREET ADDRESS	STD CASERTA, BERNARD 6900 NW 52 ST MIAMI, FL						VOS 150.00
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE				

12. I hereby certify that the information supplied with this filling 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.

SIGNATURE:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-05

Daytime Phone #