



**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2007 08:00 A
Secretary of State

DOCUMENT # 716544 1. Entity Name THE BEVERLY ARMS INC.	
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Principal Place of Business 8132 HARDING AVE MIAMI BEACH, FL 33141	Mailing Address 8132 HARDING AVE APT 7 MIAMI BEACH, FL 33141 US
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DO NOT WRITE IN THIS SPACE


04222007 No Chg-NP CR2E037 (4/06)
4. FEI Number **59-1288515** Applied For
Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent
**STANG, ALAN
8132 HARDING AVE #7
MIAMI BEACH, FL 33141**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PERES, ANDRE 8217 ABBOTT AVE #9 MIAMI BEACH, FL 33141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPDS STANG, ALAN 8132 HARDING AVE. APT. 7 MIAMI BEACH, FL 33141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BLAZEJEWSKI, MICHELINE 8132 HARDING AVE APT 15 MIAMI BEACH, FL 33141
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IN THIS SPACE**

U00000735093
05/10/07-80020-007 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date **4/20/07** Daytime Phone # **305-342-1284**