

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000001753

Entity Name: BEACHHOUSE PROPERTIES, INC.

FILED
Jun 21, 2007
Secretary of State

Current Principal Place of Business:

% TOWER HOLDING NY CORP
452 5TH AVE, COMM. REAL EST - 3RD FL
NEW YORK, NY 10018

New Principal Place of Business:

% TOWER HOLDING NY CORP
452 5TH AVE, COMM. REAL EST - 24TH FLOOR
NEW YORK, NY 10018

Current Mailing Address:

C/O TOWER HOLDING NY CORP.
452 FIFTH AVE COMM REAL EST. 24TH FLOOR
NEW YORK, NY 10018

New Mailing Address:

FEI Number: 11-2631682 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: D () Delete
Name: DEZEGO, RICHARD C
Address: 452 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10018

Title: P () Delete
Name: NAGLE, GERALD A
Address: ONE HSBC CENTER
City-St-Zip: BUFFALO, NY 14203

Title: D () Delete
Name: CIHANEK, EDWARD
Address: 452 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10018

Title: D () Delete
Name: STOKES, FLORENCE
Address: 452 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10018

Title: S () Delete
Name: HORWATH, NINA
Address: 452 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10018

Title: AS () Delete
Name: PICKEL, PAMELA
Address: ONE HSBC CENTER
City-St-Zip: BUFFALO, NY 14203

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: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AS (X) Change () Addition
Name: PICKEL, PAMELA A
Address: ONE HSBC CENTER
City-St-Zip: BUFFALO, NY 14203

I hereby certify that the information supplied with this filing does not qualify 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: PAMELA A. PICKEL

AS

06/21/2007

Electronic Signature of Signing Officer or Director

_____ Date