

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 26 AM 9:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F98733

(1)

1. Corporation Name

PEACH OF A BEACH, INC.

Principal Place of Business

C/O RICHARD K. BERNSTEIN
555 MADISON AVENUE, 29TH FLOOR
NEW YORK NY 10022

Mailing Address

C/O RICHARD K. BERNSTEIN
555 MADISON AVENUE, 29TH FLOOR
NEW YORK NY 10022

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/08/1982

3a. Date of Last Report

02/03/1994

4. FEI Number

59-2334520

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

Trust Fund Contribution

☐

6. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

C/O RICHARD BERNSTEIN ASSOC.
551 MADISON AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

3 FLOOR

City & State

City & State

NEW YORK NY

Zip

Country

Zip

Country

10022-3212

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

REYNOLDS, MAXINE V E
433 PLAZA REAL #241
BOCA RATON 33432

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME BERNSTEIN, RICHARD K.
STREET ADDRESS 555 MADISON AVE 29TH FLR
CITY-ST-ZIP NEW YORK NY

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 551 MADISON AVE 3 FLOOR
1.4 CITY-ST-ZIP NEW YORK NY 10022-3212

TITLE D
NAME CHARRON, ANGELA M.
STREET ADDRESS 555 MADISON AVENUE
CITY-ST-ZIP NEW YORK NY

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 551 MADISON AVE 3 FLOOR
2.4 CITY-ST-ZIP NEW YORK NY 10022-3212

TITLE VDS
NAME BLACKSTOCK, JOANN
STREET ADDRESS 555 MADISON AVE 29TH FLR
CITY-ST-ZIP NEW YORK NY

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 551 MADISON AVENUE 3 FLOOR
3.4 CITY-ST-ZIP NEW YORK NY 10022-3212

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/95

Date

212-750-0544

Telephone Number