2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G77148

Entity Name: BEACH BAZAAR OF DAYTONA BEACH, INC.

US

FILED Apr 23, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

203 N ATLANTIC AVE DAYTONA BCH, FL 32118

Current Mailing Address: New Mailing Address:

% 71 RIVERSIDE DR. 71 RIVERSIDE DR.

ORMOND BEACH, FL 32176 ORMOND BEACH, FL 32176

FEI Number: 59-2378593 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KOSTIDAKIS, HELEN F. 71 RIVERSIDE DR. ORMOND BEACH, FL 32176 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition KOSTIDAKIS, TIMOTHY J. KOSTIDAKIS, TIMOTHY J. Name: Name: 81 ATWOOD LANE 81 ATWOOD LANE Address: Address: City-St-Zip: ORMOND BCH., FL City-St-Zip: ORMOND BCH., FL 32176 US

Title: VP () Delete Title: VP (X) Change () Addition Name: KOSTIDAKIS, PERRY Name: KOSTIDAKIS, PERRY

Address: 71 RIVERSIDE DR. Address: 71 RIVERSIDE DR.
City-St-Zip: ORMOND BCH., FL City-St-Zip: ORMOND BCH., FL 32176

 Title:
 S
 () Delete
 Title:
 S
 (X) Change () Addition

 Name:
 KOSTIDAKIS, HELEN F

 Name:
 KOSTIDAKIS, HELEN F

Address: 71 RIVERSIDE DR Address: 71 RIVERSIDE DR City-St-Zip: ORMOND BCH, FL 32176

Title: T () Delete Title: T (X) Change () Addition

Name:ANDREOULAS, MARIA FName:ANDREOULAS, MARIA FAddress:50 MAYFIELD CIRAddress:50 MAYFIELD CIRCity-St-Zip:ORMOND BCH, FL 32174City-St-Zip:ORMOND BCH, FL 32174

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: HELEN F. KOSTIDAKS S 04/23/2009