2005 FOR PROFIT CORPORATION-ANNUAL REPORT

FILED Apr 02, 2005 08:00 AM Secretary of State

DOCUMENT # G90924 1. Entity Name BEAU'S DESIGN, INC.				5	ecretary	oi Stat
Principal Place of Business % LARRY PITCHFORD 3401 NORTHEAST 10 ST. NÖ. 5 POMPANO BEACH, FL 33062	Mailing Address % LARRY PITCHFORD 3401 NORTHEAST 10 ST. NO. POMPANO BEACH, FL 33062	5), BURK HUNT BY BU BY BY, BU	
DO NOT WRITE	and the state of t	CE	02192005 4. FEI Numb 59-238	No Chg-P	CR2E034 (10/	Applied For Not Applicable Additional
6. Name and Address of Current Re-	istered Agent					
PITCHFORD, LARRY 3401 NORTHEAST 10 ST. NO. 5 POMPANO BEACH, FL 33062			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, lypod or printed name of registered agent and	tle if applicable (NOTE, Rogistere	d Agent signature require	ed when reinstaling)		DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Final Trust Fund Contribution.		5.00 May Be ded to Fees			
10. OFFICERS AND DIF TITLE PST NAME PITCHFORD, LARRY STREET ADDRESS 3401 NE 10TH ST #5 CITY-ST-ZIP POMPANO BCH., FL	ECTORS			U0005 04/02/05	00284695 5-80014-02	4 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			·			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT W	/RITE	į
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN .	THIS SF	PACE	

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 CITY-ST-ZIP

> Larry Pitchford SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President - 27 - 30 - 954 - 942 - 3664