FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthayn

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J60131

(6)

FILED Mar 04 1998 8:00am Secretary of State

BEANO	, INC.														
Principal Place	e of Busines	S		М	lailing Address						 	IDI IKUI UKUII DIQ	ile mantili mana ma	BII BEBH 48BI	
1671 SHERBROOK DR CLEARWATER FL 34624				(1671 SHERBROOK RD CLEARWATER FL 34624						DO NOT W	RITE IN THIS	COACE		
US				į	JS					3, Date Incorpo 02/27/19	orated or Qualif		SPACE		
2. Principal Place of Business 21					2a. Mailing Address 26					4, FEI Number 59-2783		<u>.</u>	 	Applied For lot Applicab	ole
Suite, Apt. #, etc.					Suite, Apt. #, etc.					5. Certificate of Status Desired S8.75 Additional Fee Required					
City & State				28	City & State					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip		Co	untry	1.	Zip	Co	untry			8. This corpora	ition owes or ha	s paid the c	urrent year I	ntangible	
24		25		29		30					perty Tax due .			□ No	
	g, Name and Address of Current			rent Regis	Registered Agent			10. Name and Address of New Registered Agent							_
HAIN, RICHARD L., SR.								Name-	TA	ammy T	r. Hai	υ U			
1871 SHERBROOK RD							82	Street		ss (P.Q. Box Num	ber is Not Acce	otable) (\dashv
CLEARWATER FL 34624								أفأأ	ŽΪ		rook	Rd			
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11. Pursuant	to the provis	sions of	Sections 607.0	502 and €	607.1508, Florida Stati ida. Such change wa	lutes, the i	above	-named				the purpose	of changing	its registere	d
office or r	egistered aç m familiar w	gent, or	both, in the Sta	ate of Flori ligations o	ida. Such change wa if, Section 607.0505,	s authorize Florida Sta	ed by	the corp	oratio	in's board of direc	ctors. I hereby a	ccept the ap	opointment a	s registered	'
-	7 -				· · · · · · · · · · · · · · · · · · ·	2. 1						ala	37 KD P	•	
SIGNATURE	Signature, typed	d or ptinight	name of togistered	agent and life	e r applicable (N	OTE Register	ed Age	ni signature	required	d when reinstating)		DATE			
12.			OFFICERS A		CTORS	13				ADDITIONS/C	CHANGES TO C				
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NASHE			D L., SR.			1.21	NAME		To	amount.	Hain .				
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NAME							NAME								
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14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplicit in 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.