

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 16, 2007 8:00 am
Secretary of State

04-27-2007 90030 049 ****50.00

DOCUMENT # L05000118980			
1. Entity Name BEACH WALK LLC			
Principal Place of Business 500 SOUTH 3RD ST JACKSONVILLE BEACH, FL 32250		Mailing Address 500 SOUTH 3RD ST JACKSONVILLE BEACH, FL 32250	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
02122007 Chg-LLC CR2E083 (12/06)		4. FEI Number 20-3933281	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required		Applied For Not Applicable	
6. Name and Address of Current Registered Agent DARABI, FARZIN 63 BEACH AVENUE ATLANTIC BEACH, FL 32233		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when renewing) DATE _____			
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State	
9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP DARABI, FARZIN 63 BEACH AVE ATLANTIC BEACH, FL 32233	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP MANAGER DARABI, FARZIN 63 BEACH AVE ATLANTIC B/H FL 32233	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP MANAGER BAHMAN KHOSROWZADEH 500 SOUTH 3RD ST JAX BEH FL 32250	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 606, Florida Statutes.			
SIGNATURE: <i>F. Darabi</i> Farzin Darabi		Date: 4-23-07 904-294-6093	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date	

ATTACHMENT

30007968

#L05000118980

Dear Sirs/Madams:

I apologize for my error.
When I wrote in MM I thought
that was the abbreviation for
managing member.

Anyway both of these are
managers.

Thank you!

Brittany Johnson