2005 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 16, 2005 08:00 AM **DOCUMENT # L75713 Secretary of State** 8 TILL LATE AT THE BEACH INC. Principal Place of Business Mailing Address 1375 SOUTH THIRD ST. -1375 SOUTH THIRD ST. JACKSONVILLE BCH, FL 32250 JACKSONVILLE BCH, FL 32250 US No Chg-P CR2E034 (10/03) 02212005 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3014619 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent BHIKHA, SUNIL DO NOT WRITE 1375 S 3RD ST JACKSONVILLE BEACH, FL 32250 IN THIS SPACE 3. 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. Stoneture, typed or printed name of moistered agent and title if applicable. (NOTE: Registered Anapt signature required when minstaling) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE BHIKHA, SUNIL NAME STREET ADDRESS 1237 EAST WILLOW OAKS DR. CITY-ST-ZIP JACKSONVILLE BCH. FL U00000264972 DT ITTLE 03/16/05-80036-023 150.00 PATEL, DILIP Z. NAME 1700 SAN PABLO RD STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32224 TITLE PARAG, JAYESH NAME STREET ADDRESS 8720 ROLLING BROOK LN DO NOT WRITE CITY-ST-ZIP JACKSONVILLE, FL 32256 TITLE IN THIS SPACE NAME KANTI, PATEL 3360 QUEEN ANN LN STREET ADDRESS JACKSONVILLE, FL 32257 CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST- ZIP TITLE NAME

12. 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 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.

λ./.

STREET ADDRESS CITY - ST - ZIP

Diliplatel

DILIP PATEL

3/14/05

904) 254-4402

Daytime Phone #

FILED