FILED
Jan 23, 2006 08:00 AM
Secretary of State

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # L75713

1. Entity Name
8 TILL LATE AT THE BEACH INC.

Principal Place of Business	Mailing Address
1375 SOUTH THIRD ST. JACKSONVILLE BCH, FL 32250 US	1375 SOUTH THIRD ST. JACKSONVILLE BCH, FL 32250 US

01162006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3014619

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BHIKHA, SUNIL
375 S 3RD ST
JACKSONVILLE BEACH, FL 32250

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000397190
01/30/06-80040-012 150.00

OFFICERS AND DIRECTORS

	DPS
NAME	BHIKHA, SUNIL
ADDRESS	1237 EAST WILLOW OAKS DR.
CITY-ST	JACKSONVILLE BCH, FL
	DT
NAME	PATEL, DILIP Z.
STREET ADDRESS	1700 SAN PABLO RD
CITY-ST	JACKSONVILLE, FL 32224
TITLE	VP
NAME	PARAG, JAYESH
STREET ADDRESS	8720 ROLLING BROOK LN
CITY-ST	JACKSONVILLE, FL 32256
TITLE	VP
NAME	KANTI, PATEL
STREET ADDRESS	3360 QUEEN ANN LN
CITY-ST	JACKSONVILLE, FL 32257
TITLE	
NAME	
STREET ADDRESS	
CITY-ST	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST	

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12. 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 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: Dilip Patel DILIP PATEL 1/20/06 (904)249-6640
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #