2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 12, 2007 8:00 am Secretary of State

DOCUMENT # N31712 1. Entity Name POLISH AMERICAN SOCIAL CLUB OF BEVERLY HILLS, INC.						03-	-12-2007 90	0083 048	****61.2	25	
Principal Place PO BOX 640 BEVERLY HIL		Mailing Address PO BOX 640125 BEVERLY HILLS, FL 3				HEN HENN GENE OM	P1211 2122 4721	11 27072 21E 0 21 2 1	ni ei û t leki		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			03022007 C	hg-NP	CR2E03	37 (12/06)		
City & State			City & State			4. FEI Number 59-296531	4			plied For t Applicable	
Zip Country		Zip Cou		ntry	5. Certificate of Si			\$8.75 Add Fee Required			
	6. Name	and Address of Current		7. Name and Add	iress of New R	egistered /	Agent				
BRETT, H. JAMES 20093 E PENSYLVANIA AVE					Name Kaminski Stanley Street Address (P.O. Box Number is Not Acceptable)						
DUNNELLON, FL 34432					901	I N. Dic	kens	Dr.			
					City Cit	· · · ·	nas	FL.	Zip Code 344		
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 legistered agent. SIGNATURE Stoffaure, typed or printed registered agent and title II applicable. (NOTE: Registered Agent algorithms required when reinstating) OATE											
		rea fairmen realisator reflemento siltera	and main altibucación (MC)	E: Regustere	d videux siduramus sed	uired when reinstating)		DATE			
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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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attact then 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attact then 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attact the receiver or trustee empowered.

SIGNATURE:

GHATURE (MOTYPED OR PRINTED HAME OF SIGHING OFFICER OR DIRECTOR

Stanley Kaminski Mar. 7, 20

7 489-34-92