## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

## FILED Feb 13, 2008 08:00 AM Secretary of State DOCUMENT # P00000088166 1. Entity Name STEP FROM THE BEACH TWO, INC. Principal Place of Business Mailing Address **823 MAIN STREET** 117 SAW TOOTH LN DAYTONA BEACH, FL 32118 ORMOND BEACH, FL 32174 01072008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3675285 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent FARHAT, RAYMOND DO NOT WRITE 117 SAW TOOTH LN ORMOND BEACH, FL 32174 IN THIS SPACE 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 reinstating) U00000828470 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. THIF FARHAT, RAYMOND NAME STREET ADDRESS 117 SAWTOOTH LANE CITY-ST-ZIP ORMOND BEACH, FL 32174 FARHAT, TONI STREET ADDRESS 117 SAWTOOTH LANE ORMOND BEACH, FL 32174 CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-7IP TITLE

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

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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