

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000099010

Entity Name: BEACH 600 CORP.

FILED  
Apr 19, 2005  
Secretary of State

**Current Principal Place of Business:**

441 POINCIANA ISL DR  
SUNNY ISLES, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

441 POINCIANA ISL DR  
SUNNY ISLES, FL 33160

**New Mailing Address:**

FEI Number: 65-1152750

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SAENZ, GEORGE CPA  
45 SW 24TH ROAD  
MIAMI, FL 33129 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: FERIOLO, FRANCISCO  
Address: CORDOBA 531 60  
City-St-Zip: CP 2000 ROSARIO, ARGENTINA,

Title: D ( ) Delete  
Name: ALVES, OMAR  
Address: WHEELWRIGHT 1547  
City-St-Zip: CP 2000 ROSARIO, ARGENTINA,

Title: D ( ) Delete  
Name: FAURE, MARCELO  
Address: 1348 WASHINGTON AVENUE #125  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete  
Name: FAURE, EDGAR  
Address: 1348 WASHINGTON AVENUE #125  
City-St-Zip: MIAMI BEACH, FL 33139

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARCELO FAURE

P

04/19/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date