2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000082194

Entity Name: BEACH 622 CORP

Address:

City-St-Zip:

CORDOBA 531, PISO SEXTO

ROSARIO, ARGENTINA, AG CP2000

FILED Apr 22, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 441 POINCIANA ISLAND DRIVE N MIAMI BEACH, FL 33160 **Current Mailing Address: New Mailing Address:** 441 POINCIANA ISLAND DRIVE N MIAMI BEACH, FL 33160 FEI Number: 01-0744611 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SAENZ, GEORGE 45 SW 24 ROAD MIAMI, FL 33129 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition FAURE, MARCELO Name: Name: 441 POINCIANA ISLAND DRIVE Address: Address: City-St-Zip: N MIAMI BEACH, FL 33160 City-St-Zip: () Delete Title: Title: () Change () Addition Name: FAURE, EDGAR Name: 441 POINCIANA ISLAND DRIVE Address: Address: N MIAMI BEACH, FL 33160 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition ALVIS, OMAR Name: Name: WHEELWRIGHT 1547 Address: Address: City-St-Zip: ROSARIO, ARGENTINA, AG CP2000 City-St-Zip: Title: () Delete Title: () Change () Addition MILLEFANTI FERIOLI, FRANCISCO Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: MARCELO FAURE P 04/22/2004