

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000082194

FILED
Apr 19, 2005
Secretary of State

Entity Name: BEACH 622 CORP.

Current Principal Place of Business:

441 POINCIANA ISLAND DRIVE
N MIAMI BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

441 POINCIANA ISLAND DRIVE
N MIAMI BEACH, FL 33160

New Mailing Address:

FEI Number: 01-0744611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAENZ, GEORGE
45 SW 24 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: P, D () Delete
Name: FAURE, MARCELO
Address: 441 POINCIANA ISLAND DRIVE
City-St-Zip: N MIAMI BEACH, FL 33160

Title: D () Delete
Name: FAURE, EDGAR
Address: 441 POINCIANA ISLAND DRIVE
City-St-Zip: N MIAMI BEACH, FL 33160

Title: D () Delete
Name: ALVIS, OMAR
Address: WHEELWRIGHT 1547
City-St-Zip: ROSARIO, ARGENTINA, AG CP2000

Title: D () Delete
Name: MILLEFANTI FERIOLI, FRANCISCO
Address: CORDOBA 531, PISO SEXTO
City-St-Zip: ROSARIO, ARGENTINA, AG CP2000

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