2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
05 JUL 21 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000097760

1. Entity Name
ACC STUDIO SOUTH BEACH, INC.

Principal Place of Business	Mailing Address
1101 BRICKELL AVE., STE. #402 MIAMI, FL 33131	1101 BRICKELL AVE., STE. #402 MIAMI, FL 33131

07142005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
200 S. Biscayne Blvd.	200 S. Biscayne Blvd.
Suite, Apt. #, etc.: Suite 4000	Suite, Apt. #, etc.: Suite 4000
City & State: Miami, FL	City & State: Miami, FL
Zip: 33131 Country: USA	Zip: 33131 Country: USA

4. FEI Number: 20-1428236 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ACC (U.S.A.) INSURANCE BROKERS, INC. 1101 BRICKELL AVE., STE. #402 MIAMI, FL 33131	Name: Corporate International Registered Agents Inc. Street Address (P.O. Box Number is Not Acceptable): 200 S. Biscayne Blvd., Suite 4000 City: Miami FL Zip Code: 33131

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: _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!! FEE IS $550.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CASAL, ALI C 1101 BRICKELL AVE., STE. #402 MIAMI, FL 33131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CORDERO, VALENTINA 1101 BRICKELL AVE., STE. #402 MIAMI, FL 33131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 400057711064 07/20/05--01034--007 **550.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CORDERO, VALERIA 1101 BRICKELL AVE., STE. #402 MIAMI, FL 33131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CORDERO, VICTORIA 1101 BRICKELL AVE., STE. #402 MIAMI, FL 33131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X _____ 7/18/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #