2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000154068

Entity Name: ATLANTIC BEACH GROUP, INC.

FILED Apr 20, 2005 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business:	New Principal Place of Business:
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111 NORTH POMPANO BEACH BLVD. 1 LAS OLAS CIRCLE

1905 UNIT 913

POMPANO BEACH, FL 33062 FORT LAUDERDALE, FL 33316

Current Mailing Address: New Mailing Address:

111 NORTH POMPANO BEACH BLVD. 1 LAS OLAS CIRCLE 1905 913

POMPANO BEACH, FL 33062 FORT LAUDERDALE, FL 33316

FEI Number: 14-1917739 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:

COX, CHARLES C
111 NORTH POMPANO BEACH BLVD.
1905

COX, CHARLES C
1 LAS OLAS CIRCLE
UNIT 913

POMPANO BEACH, FL 33062 US FORT LAUDERDALE, FL 33316 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: 04/20/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: COX, CHARLES C Name: COX, CHARLES C

Address: 111 NORTH POMPANO BEACH BLVD #1905 Address: 1 LAS OLAS CIRCLE

City-St-Zip: POMPANO BEACH, FL 33062 City-St-Zip: FORT LAUDERDALE, FL 33316

Title: P () Delete Title: () Change () Addition

 Name:
 NICE, DAVID J
 Name:

 Address:
 3200 NORTH OCEAN BLVD. #306
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL 33308
 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: CHARLES C. COX MR. 04/20/2005