

2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED

2006 OCT 19 AM 9:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P05000014203

1. Entity Name
SOUTH BEACH STREET DEVELOPMENT, INC.



Principal Place of Business
105 W BEAVER STREET UNITS 9 & 10
RICHMOND HILL ONTARIO CANADA, L4B -LC6

Mailing Address
105 W BEAVER STREET UNITS 9 & 10
RICHMOND HILL ONTARIO CANADA, L4B -LC6

2. Principal Place of Business
217 N. Westmonte Dr.

3. Mailing Address
217 N. Westmonte Dr.

Suite, Apt. #, etc.
Suite 2013

Suite, Apt. #, etc.
Suite 2013

City & State
Altamonte Springs, FL 32714

City & State
Altamonte Springs, FL 32714

Zip
32714

Country
USA

Zip
32714

Country
USA

10122006 REIN-P CR2E098 (11/05)

4. FEI Number
20-2261711

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

STONE, MARY A
201 E PINE STREET SUITE 500
ORLANDO, FL 32801

7. Name and Address of New Registered Agent

Name
N. Dwayne Gray, Jr., Esq.

Street Address (P.O. Box Number is Not Acceptable)
201 E. Pine Street, Ste. 500

City
Orlando, FL

Zip Code
32801

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 N. Dwayne Gray, Jr., 10/13/06

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

FILE NOW!!! FEE IS \$750.00
After January 1, 2007, Fee will be \$900.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
LUCCHESI, FABRIZIO ☐ Delete
105 W BEAVER STREET UNITS 9 & 10
RICHMOND HILL ONTARIO CANADA, L4B LC6

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
REED, DAVID A ☐ Delete
105 W BEAVER STREET UNITS 9 & 10
RICHMOND HILL ONTARIO CANADA, L4B LC6

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
MYERS, WILLIAM P ☐ Delete
105 W BEAVER STREET UNITS 9 & 10
RICHMOND HILL ONTARIO CANADA, L4B LC6

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
700081029917
10/13/06--01039--021 **750.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
REED, DAVID A ☒ Change ☐ Addition
217 N. Westmonte Drive, Suite 2013
Altamonte Springs, FL 32714

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: David A. Reed

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/16/06

407-339-7050

Daytime Phone #