

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000026908

**FILED**  
**Apr 27, 2009**  
**Secretary of State**

**Entity Name:** BEACHSIDE CONSTRUCTION, INC.

**Current Principal Place of Business:**

107 MARION ST.  
INDIAN HARBOUR BEACH, FL 32937

**New Principal Place of Business:**

**Current Mailing Address:**

107 MARION ST  
INDIAN HARBOUR BEACH, FL 32937

**New Mailing Address:**

107 MARION ST.  
INDIAN HARBOUR BEACH, FL 32937

**FEI Number:** 84-1672014

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

STIVERS, AZRAEL  
107 MARION ST  
INDIAN HARBOUR BEACH, FL 32937 US

**Name and Address of New Registered Agent:**

STIVERS, AZRAEL D PRES.  
107 MARION ST  
INDIAN HARBOUR BEACH, FL 32937 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: AZRAEL STIVERS

04/27/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: STIVERS, AZRAEL  
Address: 107 MARION STREET  
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: AZRAEL STIVERS

PRES

04/27/2009

Electronic Signature of Signing Officer or Director

Date